

## **Re: Electronic Filing for Notice of Change (Canada Corporation)**

Dear Sir/Madam:

To change **Business Address** or **Directors' Information** of your corporation, we offer Electronic Filing for Notice of Change. This service will provide you with the following documents:

- Form 3 Address Change and/or Form 6 Directors' Change E-filing records;
- Corporate Profile Report from Corporations Canada. This electronic report will show the updated information of the corporation after the filing.

Please provide your Federal **Corporation Key** and choose F09 on the Price List.

If there are any changes regarding the shares or shareholders, please update your minute book as this is your corporation's internal issue only; not public information. If you would like to order the minute book kit and updating service please download our Corporate Supplies Order form.

Please provide a copy of your Articles of Incorporation and fill up the information form as well.

- ◆ If you wish to change the name of the corporation or to change any items on the Articles of Incorporation, please download the information form for Amendment of Federal Corporation Order Form.

If you have any questions, please do not hesitate to contact us! Thank you very much!

Sincerely,

Sandra Chen / Susan Ding

## Best Ontario Service Price

GOVERNMENT FEES	Incorporation	Amendment	Restated	Revival	Business Name
ONTARIO REGISTRATION	\$395.00	\$265.00	\$265.00	\$445.00	\$115.00
FEDERAL REGISTRATION	\$200.00	\$200.00	\$100.00	\$250.00	N/A

### ONTARIO INCORPORATION PACKAGE (Profit) & ONTARIO BUSINESS NAME REGISTRATION

	REG	HST	TOTAL
<input type="checkbox"/> P01 NUANS <sup>®</sup> Report, Incorporation Filing, Initial Return Filing, Company Key, BN(Tax) Number	220.00	28.60	248.60
<input type="checkbox"/> P02 NUANS <sup>®</sup> Report, Incorporation Filing, Initial Return Filing, Minute Book & Seal, Company Key, BN(Tax) Number	390.00	50.70	440.70
<input type="checkbox"/> P03 NUANS <sup>®</sup> Report, Incorporation Filing, Initial Return Filing, Seal, Company Key, BN(Tax) Number	310.00	40.30	350.30
<input type="checkbox"/> P04 Numbered Company Incorporation Filing, Initial Return Filing, Company Key, BN(Tax) Number	178.00	23.14	201.14
<input type="checkbox"/> P05 Numbered Company Incorporation Filing, Initial Return Filing, Minute Book & Seal, Company Key, BN(Tax) Number	348.00	45.24	393.24
<input type="checkbox"/> P06 Numbered Company Incorporation Filing, Initial Return Filing, Seal, Company Key, BN(Tax) Number	268.00	34.84	302.84
<input type="checkbox"/> P07 Corporation Amendment, Articles & Filing	220.00	28.60	248.60
<input type="checkbox"/> P08 Restated Articles of Incorporation, Articles & Filing	220.00	28.60	248.60
<input type="checkbox"/> P09 Corporation Dissolution Articles & Filing	120.00	15.60	135.60
<input type="checkbox"/> P10 Corporation Revival Articles & Filing	220.00	28.60	248.60
<input type="checkbox"/> P11 Corporation Notice of Change (Form 1) Filing with Profile Report, Company Key	150.00	19.50	169.50
<input type="checkbox"/> P12 Ontario Initial Return (Form 2) - for Extra Provincial Corporation, Company Key	115.00	14.95	129.95
<input type="checkbox"/> P13 Ontario Sole Proprietorship / Partnership / Trade Name Registration	105.00	13.65	118.65

### ONTARIO INCORPORATION PACKAGE (Not-for-Profit / Charitable)

	REG	HST	TOTAL
<input type="checkbox"/> N01 NUANS <sup>®</sup> Report, Non-Profit / Charity Articles Preparing, Government Filing, Initial Return	265.00	34.45	299.45
<input type="checkbox"/> N02 NUANS <sup>®</sup> Report, Non-Profit / Charity Articles Preparing, Government Filing, Initial Return & Seal	355.00	46.15	401.15

### FEDERAL INCORPORATION (Profit)

	REG	HST	TOTAL
<input type="checkbox"/> F01 NUANS <sup>®</sup> Report, Federal Registration, Ontario Registration & Company Key, BN(Tax) Number	280.00	36.40	316.40
<input type="checkbox"/> F02 NUANS <sup>®</sup> Report, Federal Registration, Ontario Registration & Company Key, BN(Tax) Number, Minute Book & Seal	450.00	58.50	508.50
<input type="checkbox"/> F03 NUANS <sup>®</sup> Report, Federal Registration, Ontario Registration & Company Key, BN(Tax) Number, Seal	370.00	48.10	418.10
<input type="checkbox"/> F04 Numbered Corporation Registration, Ontario Registration & Company Key, BN(Tax) Number	238.00	30.94	268.94
<input type="checkbox"/> F05 Numbered Corporation Registration, Ontario Registration & Company Key, BN(Tax) Number, Minute Book & Seal	408.00	53.04	461.04
<input type="checkbox"/> F06 Numbered Corporation Registration & Company Key, BN(Tax) Number, Seal	328.00	42.64	370.64
<input type="checkbox"/> F07 Federal Corporation Amendment	225.00	29.25	254.25
<input type="checkbox"/> F08 Federal Corporation Revival	280.00	36.40	316.40
<input type="checkbox"/> F09 Federal Corporation address change / directors change with updated profile report	190.00	24.70	214.70

### SEARCH & REPORT

	REG	HST	TOTAL
<input type="checkbox"/> 101 Ontario / Federal Corporate Name Search Report (NUANS <sup>®</sup> ) – Standard Service	42.00	5.46	47.46
<input type="checkbox"/> 102 Ontario Corporate Profile Search Report	75.00	9.75	84.75
<input type="checkbox"/> 103 Ontario Corporate Microfiche - Copies of Documents	75.00	9.75	84.75

### CORPORATE SUPPLIES

	REG	HST	TOTAL
<input type="checkbox"/> 301 Corporate Seal	90.00	11.70	101.70
<input type="checkbox"/> 302 Minute Book Kit With Seal (Black Brief-case)	170.00	22.10	192.10
<input type="checkbox"/> 303 Minute Book With Name Printed (Burgundy case)	125.00	16.25	141.25
<input type="checkbox"/> 304 Minute Book Kit Without Seal (Black Brief-case)	135.00	17.55	152.55
<input type="checkbox"/> 305 Minute Book Initializing/Updating	140.00	18.20	158.20

 Minister of Finance (Ontario) or  
Receiver general of Canada (Federal)

\$

 Payable to  
Best Ontario Inc.

\$

CARD HOLDER'S NAME and SIGNATURE:

 VISA

 MasterCard

 American Express

First Name:

Middle Initial:

Last Name:

Card Number:

Expire Date:

Security Code:

 The Cardholder Signature: **X**

Please **sign here** to acknowledge this order and agree to pay by the credit card.

## Appointment of Representative

I, \_\_\_\_\_  
(First name, Middle names and Surname)

address for service

\_\_\_\_\_  
(Street & No. or R.R. No., Municipality, Province, Country & Postal Code)

am

- a Director*  
 *an authorized Officer*  
 *a Shareholder*

(Check appropriate box)

*of the following corporation:*

\_\_\_\_\_  
(Name of Corporation)

I hereby authorize BEST ONTARIO INC. to serve as my representative and to conduct business on my behalf with Corporations Canada.

I authorize Corporations Canada to release information from my file.

I certify that the information set out hereafter, is true and correct.

\_\_\_\_\_  
(Signature of the Authorizing Person)

**By signing this form, you acknowledge that you have relevant knowledge and that you are authorized to submit this form.**

# Corporation Address / Directors' Information Change

Contact Name: \_\_\_\_\_ Tel: (    )                      Cell: (    )                      Date: \_\_\_\_\_

## 1. Name of the Corporation

\_\_\_\_\_

2. Corporation KEY \_\_\_\_\_

## 3. New Address of the Registered Business Office

Suite/Apt./Unit: \_\_\_\_\_ Street No. & Name: \_\_\_\_\_

City: \_\_\_\_\_ Province:  ONTARIO Postal Code: \_\_\_\_\_ Business Phone: (    ) \_\_\_\_\_

## 4. Directors' Information

FIRST	First Name: _____	Middle Name: _____	Last Name: _____
	<input type="checkbox"/> Same as business address	Suite: _____	Street No. & Name: _____
	Canadian/Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	Postal Code: _____	City: _____ Province: <input type="checkbox"/> ONTARIO
	Signature: _____	Date of Elected: _____	Date of Resigned: _____
	Officer Position: <input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Manager <input type="checkbox"/> Other: _____	YY-MM-DD	YY-MM-DD

SECOND	First Name: _____	Middle Name: _____	Last Name: _____
	<input type="checkbox"/> Same as business address	Suite: _____	Street No. & Name: _____
	Canadian/Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	Postal Code: _____	City: _____ Province: <input type="checkbox"/> ONTARIO
	Signature: _____	Date of Elected: _____	Date of Resigned: _____
	Officer Position: <input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Manager <input type="checkbox"/> Other: _____	YY-MM-DD	YY-MM-DD

THIRD	First Name: _____	Middle Name: _____	Last Name: _____
	<input type="checkbox"/> Same as business address	Suite: _____	Street No. & Name: _____
	Canadian/Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	Postal Code: _____	City: _____ Province: <input type="checkbox"/> ONTARIO
	Signature: _____	Date of Elected: _____	Date of Resigned: _____
	Officer Position: <input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Manager <input type="checkbox"/> Other: _____	YY-MM-DD	YY-MM-DD

Note: If you have more directors, please write on another copy of this request form or provide the same info on a separate piece of paper.

## 5. Additional Information

➤ E-mail Back?  YES E-mail address: \_\_\_\_\_