

NOTICE OF CHANGE – Commissioner for Oaths



Office Use only

Rec'd:

Entered:

Released:

COMMISSIONER'S FULL NAME: (Legal last name, middle name, first name):

COMMISSIONER'S EXPIRY DATE: (DD/MM/YYYY):

DAYTIME PHONE NUMBER/ EMAIL:

WHAT ARE YOU CHANGING?

NAME CHANGE – (a new certificate bearing new name will be mailed to the address on record)

Previous legal name(s):

New legal name(s):

When did your name change? (dd/mm/yyyy):

ALL OTHER CHANGES – home address, work address, phone number, etc.

Previous information:

New information:

DECLARATION

I declare that all changes made in this notification are true.

Signature of CFO

Date: _____
(dd/mm/yyyy)

Form cannot be e-mailed or faxed

Mail or drop off: Companies Office 1010-405 Broadway, WPG, MB R3C 3L6

Changes made *Allow 10 business days for changes to take place.