

**COMPANIES OFFICE  
FILING REQUEST**



Series \_\_\_\_\_ of \_\_\_\_\_

Entity Name: \_\_\_\_\_

Registry Number: \_\_\_\_\_ and/or Business Number: \_\_\_\_\_

**A** Return Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Client Reference Number: \_\_\_\_\_

<p><b>B</b> Name Reservation Number, if applicable: _____</p>	<p><b>C</b> EXPEDITED SERVICE REQUESTED: (additional fees apply)</p>	<p><b>D</b> Effective Date – is the date documents are received unless you specify a date up to 30 days in the future:                   _____                  Day                  Month                  Year                   Documents will be processed and released after this date</p>
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<p><b>E</b> Confirm Mailing Address for Annual Return/Renewal: Same as box A</p> <p>Note: If not completed, the registered office address will be recorded as the mailing address</p>	<p><b>F</b> Provide an <b>email address</b> if you wish to receive Annual Return/Renewal notifications electronically:                   _____</p>
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**Return fee and two copies to:  
Companies Office 1010 – 405 Broadway, Winnipeg, MB. R3C 3L6**

OFFICE USE ONLY			
Type of forms being filed: <input type="checkbox"/> Corporate <input type="checkbox"/> Business <input type="checkbox"/> Cooperative			Initials:
Fees:	Payment method OR Account number:	Received On:	
_____ _____ _____			
Released Date (dd/mm/yyyy):	Released By:	Pickup Date (dd/mm/yyyy):	Signature (Pickup):

The Corporations Act  
**ARTICLES OF INCORPORATION**  
(without Share Capital)



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1. Name of Corporation

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2. The address in full of the registered office (include postal code)

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3. Number (or minimum and maximum number) of directors

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4. First directors

Name in full	Address in full (include postal code)

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5. The undertaking of the corporation is restricted to the following

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6. Other provisions, if any

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7. The corporation has no authorized capital and shall be carried on without pecuniary gain to its members, and any profits or other accretions to the corporation shall be used in furthering its undertaking.

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8. Each first director named herein becomes a member of the corporation upon incorporation.

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9. Where the undertaking of the corporation is of a social nature, the address in full of the clubhouse or similar premises that the corporation will maintain.

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10. I have satisfied myself that, the proposed name of the corporation is not the same as or similar to the name of any known body corporate, association, partnership, individual or business so as to be likely to confuse or mislead.

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11. Incorporators

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Name in full	Address in full (include postal code)	Signature

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**Note:** If any First Director named in paragraph 4 is not an Incorporator, a Form 3 “Consent to Act as a First Director” must be attached. A minimum of three directors is required for incorporation. State full civic address in paragraphs 2, 4 and 11 – a P.O. box number alone is not acceptable.