Belize International LLC Application



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| 1- LLC | INFORMATION | | | | | | | |
|--|--|---|--------------------------------|------------------------------------|----------------------------------|---------|--|--|
| | | *For v | our convenience the | highlighted areas serve as m | uidelines for a standard LLC for | rmation | | |
| Propose | ed Name of LLC: | 1 or ye | our convenience the | inginigited areas serve as ge | andennes for a standard EEC fo. | imation | | |
| | | | | | | | | |
| L. | | | | | | | | |
| | give 3 alternative names in order of priority: | | | | | | | |
| a) | | | | | | | | |
| b) | | | | | | | | |
| c) | | | | | | | | |
| Describ | e the nature of the business to be undertaken | n by the LLC: (Please be | as specific as poss | sible) | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| NOTE: A | Belize International LLC is prohibited form carr | ying on the following activit | ies: | | | | | |
| | Carrying on business with persons resident in Be | | | .\ | A = 4 (6641= - A = 421) | | | |
| | Owning an interest in real property situated in Be Carrying on a banking business unless it is licens | | | | Act ("the Act"); | | | |
| | Carrying on business as an insurance or reinsura | | gent or insurance | broker, unless it is license | ed; | | | |
| | Carrying on the business of providing the registe Carrying on trust business, unless it is licensed; | red office for companies; | | | | | | |
| g)C | arrying on collective investment schemes, unles | | | | | | | |
| | olding shares, stock, debt obligations or other solubstituting the said Act; | ecurities in a company inco | rporated under the | Companies Act or under | any enactment amending o | r | | |
| i)S | ubject to certain statutory exceptions, issuing its | | | | ent in Belize or to any compa | iny | | |
| in | corporated under the Companies Act or under a | ny enactment amending or | substituting the sa | id Act. | | | | |
| 2 - AR1 | TICLES OF ORGANISATION | | | | | | | |
| _ / | iolio di ditorimoni | | | | | | | |
| | a)Standard Provisions: The standard arti | cles of incorporation are ve | erv widelv drawn ar | nd suitable for most types | of business activity. | | | |
| | -, | | , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| | Do you require these provisions? | YES | NO | | | | | |
| | (if YES, go straight to Section 3) | TLS | NO | | | | | |
| | (ii 120, go straight to Section 3) | | | | | | | |
| | | | | | | | | |
| b)Non-Standard Provisions: If NO, please provide details of your specific requirements on a separate sheet and attach. | | | | | | | | |
| | | | | | | | | |
| 3 - MAI | NAGERS | | | | | | | |
| _ | | | | | | | | |
| Do | you require nominee Manager? | YES | NO | | | | | |
| | | | | | | | | |
| lt . | VES abases corporate or individual: | COR | NO | | | | | |
| " | YES, choose corporate or individual: | COR | NO | | | | | |
| | | | | | | | | |
| | NO, please provide us with names, nationalities, | addresses and present oc Nationality | cupation of the car Address | ndidates: | Occupation | 1 | | |
| | | reactionality | Address | | Оссирации | | | |
| | | | | | | | | |
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| | | | | | | 1 | | |
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| | | | | | | | | |
| I No | te: Neither Belize Corporate Services Limited, nor a | ny officer, director, employee | . representative, ser | vant, agent, delegate, subsi | diary or affiliate thereof ("the | | | |

Note: Nettner Beitze Corporate Services Limited, nor any officer, director, employee, representative, servant, agent, delegate, subsidiary or affiliate thereof ("the Indemnitees") provides any nominee manager services. In the event that nominee manager services are required, by signing this application, the applicant irrevocably and unconditionally acknowledges, agrees and solemnly declares that the Indemnitees shall not suffer any liability, damage or loss in the event that either of the Indemnitees shall inform the applicant of third parties who offer nominee director services and the applicant, the proposed company or any other related party shall act or otherwise instruct the Indemnitee to act on such information and suffer liability, damage or loss arising from or in connection with the said nominee director services. The applicant hereby further agrees to indemnify, defend and hold harmless the Indemnitees in respect of all liabilities, damages, loss and expenses incurred (including attorneys' fees) and against all actions, proceedings, costs, claims and demands arising as a result of or in connection with the provision of nominee manager services by third parties or otherwise to the applicant or his proposed company or any related party thereto.

| 4 - MEMB | BERS | | | | | |
|-------------|---------------------|------------------------------------|---------------------------------------|--------------------------|--|--------|
| | | | | | | |
| ne followir | | registered as members: | | al along a | Manula analain Internat | |
| | Name | Nationality | P | ddress | Membership Interest | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5 - DETAI | ILS OF CONTAC | T PERSON (Person you would | ld like the Bank to conta | ct regarding the affairs | s of the company) | |
| First Name | | | Email | | | |
| Address | | | Home No. ()- | - | | |
| City | | Zip | Work No. ()- | = | | |
| | quested to commur | nicate using the following | Mobile No. ()- | - | | |
| methods: | | | Fox No. (| | | |
| Mail | Fax | Email Fax | Fax No. ()- | - | | |
| | | | | | | |
| | | | | | | |
| 8 - POWE | R OF ATTORNE | Y (Not required) *If needed, power | er of attorney must be fo | r a specific purpose a | nd must not exceed one year. | |
| In the nam | e of the following | noreone: | | | | |
| | ne (Mr./Mrs./Ms.) | persons. | Family Name | /Mr /Mro /Mo) | | |
| First Name | | | Family Name First Name(s) | (1011./10115./1015.) | | |
| Permanent | • • | | Permanent Ad | ddress | | |
| | | 7:- | | | 7:- | |
| City | State | Zip | City | State | Zip | |
| | | | | | | |
| | Please state the \$ | Specific Powers below: | | | | |
| | | | | | | |
| | | | | | | |
| 9 - INCOR | RPORATION DO | CUMENTS (Not required) | | | | |
| | | | | | | |
| | a)Special | instructions regarding incorpor | ration documents: | | | |
| | Notarisation | | | | | |
| | | Notario | ation & Apostille | | | |
| | | | · | a a alia ation | | |
| | | | ation & Apostille & L | egansanon | | |
| | | Any oth | | | | |
| | b)Indicate | which of the following docume | | - | illed / Legalised | |
| | | | andum & Articles of | Association | | |
| | | | ate of Incorporation tment of Manager | | | |
| | | Appoint Any oth | ŭ | | | |
| | | | lei | | | |
| 10 - ADDI | ITIONAL DUE DI | ILIGENCE | | | | |
| | | | | | | |
| | | | ch ultimate beneficia | l owner, director ar | nd attorney-in-fact (i.e. who is a | grante |
| or a power | ., . | vith this application form: | | | | |
| | • | ed Copy of Passport | | | | |
| | b)Bank Re | eference Letter with whom re | elevant person has | had banking relat | tionship with for at least 2 yea t person has had professiona | ars |
| | c)relation | ship with for at least 2 years | reletetice Fettel M | iiii wiioiii reievan | i person nas nau professiona | 11 |
| | d)Copy of | utility bill showing place of | residence | | | |

| Note: All inform | ation provided is kept in str | ictest confidence by | the Bank in accorda | ance with t | he laws of Be | elize | | |
|------------------------------------|--|---|---------------------------------------|-------------|---------------|---|-----------------|--|
| | | | | | | | | |
| 11 - METHO | O OF INITIAL PAYMEN | т | | | | | | |
| | | - | | | | | | |
| Please note that desired method | at all applicable fees must b | e paid prior to work | being undertaken, p | rovision of | services or s | supply of goods | s. Please tick | |
| desired metriod | | A bank transfer (please see attached Wire Transfer Instructions) A bank/personal cheque made payable through a US bank in US dollars Note: payment should not be deemed to have been made until receipt of cleared funds for purposes of commencement of work | | | | | | |
| | | Credit Card | N O I'i | | | | | |
| | | Number | Name on Credit Card Credit Card | | | | | |
| | | | Exp Date (mm/yy) | | | | | |
| | | | | ^ | Mantanana | \/ICA | | |
| 40 DELIVE | RY INSTRUCTIONS | | Card Type | Amex | Mastercard | VISA | | |
| to: | poration form has been com Mailing Address: | protoc and olginos, | Fax Number | • | | -mail: | . Tomat 2, omai | |
| | Belize Corporate Services Limited 21 Regent Street, 2 nd Floor, | | (501) 227-7018 | | _ | corporate@belizecompanies.com services@belizecompanies.com | | |
| | Belize City, Belize, C | Central America | | | | | | |
| | | | | | | | | |
| 13 - SIGNATI | URE OF APPLICANT | | | | | | | |
| Belize Corporat | d in accordance with these in te Services Limited to estab erms and conditions of serv | olish an Internationa | | | | | | |
| | | | | ١ | | | | |
| | Firm/Name | | Home No. (| | | | | |
| | Address | | Work No. (|) | | | | |
| | | | , |)) | | | | |
| | Address | | Work No. (|)) | | | | |
| | Address | | Work No. (Fax No. (|)) | | | | |
| | Address | | Work No. (|)) | | | | |