

## Fees

Correspondence related to this submission will be sent to you using the contact information provided in the Submitter Information section of the form.

**Submission Fee: \$** (go to [www.isc.ca/fees](http://www.isc.ca/fees) for the current fee schedule)

### Select one (1) delivery method for your submission notification/certificate:

- |  |   |
|--|---|
| <input type="checkbox"/> Online workspace (please provide an email address in the Submitter Information section) | <input type="checkbox"/> Email: <b>\$5 additional fee</b> |
| <input type="checkbox"/> Fax: <b>\$5 additional fee</b>  | <input type="checkbox"/> Mail: <b>\$10 additional fee</b> |

Priority Service: **\$500 additional fee**

Priority submissions will receive immediate attention and will be reviewed within one business day after being received, where possible. If you are submitting multiple forms for a single entity, only one priority service fee is required. Check the **Priority Service** box on each submission cover page.

### Total Fees: \$

Transactions will be rejected if sufficient funds are not available at the time of processing.

## Payment Methods

### ISC offers the following methods of payment:

- On account - Account number: \_\_\_\_\_ Password: \_\_\_\_\_
- Cheque or money order payable to Information Services Corporation
- Credit card – see instructions below

### Instructions to Register and Use an ISC Account

Credit Card payments are made through an ISC account.

- To open an account, visit [ISC.ca](http://ISC.ca) or contact the Customer Support Team
  - To use your account:
    - Sign in to ISC Online Services.
    - Select Account Payment.
    - Enter your credit card number, the name on the card and the expiry date.
    - Under Payment \$, enter the amount to be charged to your credit card.
- \*\* Please note: Only the main account holder can make payments online. If you are not the main account holder, please use one of the other payment methods.**

## Customer Reference Number (optional)

### Your Reference Number:

Visit our website or contact our Customer Support Team for more information: 1-866-275-4721 [ask@isc.ca](mailto:ask@isc.ca) [www.isc.ca](http://www.isc.ca)

### Submission Methods:

**Mail:** Corporate Registry  
1301 – 1<sup>st</sup> Avenue, Regina, SK S4R 8H2

**Fax:** (306) 787-8999

**Online:** [www.isc.ca/corporateregistry](http://www.isc.ca/corporateregistry)

### Section 1: Entity Details

Entity Number:

Entity Name:

### Section 2: New Entity Details

Complete this section only if the entity name has changed.

Name Reservation Number:

New Entity Name:

Name Conditions (if applicable):

If conditions were applied in the name reservation, signed name conditions forms must be enclosed with this form.

Registered Office Mailing Name (if different from new entity name):

### Section 3: Share Capital

Complete this section only if the share capital information has changed.

Does the co-operative have share capital?

Yes, the entity has share capital.

- Complete Section 3.1 before proceeding to Section 4

No, the entity does not have share capital. The interest of each member is the same as every other member.

- Proceed to Section 4

#### Section 3.1 Share Class Information

If you have more than three (3) share classes, please attach a separate document listing share class information for each class.

Name(s) of Share Class(es):	Maximum Number of Shares:	Share Class Type:	Par Value of Shares:
_____	<input type="checkbox"/> _____ or <input type="checkbox"/> Unlimited	<input type="checkbox"/> Common <input type="checkbox"/> Preferred	_____
_____	<input type="checkbox"/> _____ or <input type="checkbox"/> Unlimited	<input type="checkbox"/> Common <input type="checkbox"/> Preferred	_____
_____	<input type="checkbox"/> _____ or <input type="checkbox"/> Unlimited	<input type="checkbox"/> Common <input type="checkbox"/> Preferred	_____

#### **Section 4: Authorized Number of Directors**

Complete this section only if the authorized number of directors has changed.

If there are fewer than five (5) directors, a document describing the exceptional circumstances under which fewer than five (5) directors should be permitted must be enclosed.

If the number or range of directors is specified in the bylaws, the number of directors specified must fall within the number or range found in the articles.

**Minimum # of directors** \_\_\_\_\_ **Maximum # of directors** \_\_\_\_\_

**OR**

**Fixed # of directors** \_\_\_\_\_

#### **Section 5: Objects**

Objects provided in articles document

### Section 6: Restrictions on Business

Select one (1):

- N/A
- Restrictions provided in articles document

### Section 7: Other Provisions

Select one (1):

- N/A
- Provisions provided in articles document

### Section 8: Articles Attachment

A document containing the complete articles of reorganization must be enclosed.

The articles of reorganization must include:

- The name of the entity.
- For co-operatives with no share capital, a statement that the interest of each member is the same as that of every other member.
- For co-operatives with share capital, share class information, including the par value, rights, privileges, restrictions and conditions attached to each share class.
- The authorized number of directors.
- Objects.
- Restrictions on business (if there are no restrictions, that must be stated in the articles).
- Other provisions (if there are no other provisions, that must be stated in the articles).

### Section 9: Court Order / Plan of Arrangement

A court order and a plan of arrangement must be enclosed. The plan of arrangement may be included in the court order, or it may be a separate document.

### Section 10: Effective Date

Unless a future date is specified below, the date the properly completed form and required fees are received will be considered the effective date.

Effective Date:

### Section 11: Signature

I certify that I am authorized to file these documents with the Registrar of Co-operatives and that the information in this submission is true.

\_\_\_\_\_  
Submitter Signature

\_\_\_\_\_  
Date

### Section 12: Submitter Information

Name:

Mailing Address:

Email:

Phone Number:

Fax Number: