

## Corporate Entity Name Correction

NOTE: Please ensure the completed *Affidavit for Corporate Entity Name Correction* is included

SECTION A – CLIENT INFORMATION						
Correct Corporate Name	•					
SECTION B - EXISTING	G CLIENT INFORMATION					
		(-)				
Client Number(s):	Existing Corporate Name	e(s):				
ATTACHED (attach :	a list if more than 6 Corporate N	ame corrections)				
OFFICIAL CONTACT	TINEODMATION					
SECTION C - CONTACT	INFORMATION		Phone Number (include Area Code)			
Contact Name			THORE NUMBER (Include Area Code)			
Address			Fax Number (include Area Code)			
City		Province/State	Postal/Zip Code			
Country (if outside Canada)		Email Address				



## Affidavit for Corporate Entity Name Correction

NOTE: Please provide proof of the correct name by including a copy of the Profile Report from Corporate Registry

l,	(Name)	,of	in the Province of (Town/City)			
	, make oath	n and say that:				
1.	I am  (Position - i.e., President, Signing Officer etc.)	,of	, (Correct Name)			
		fidavit on behalf of the a	above named Corporation and am authorized to			
		(Corporation name as	s it currently exists in the Land Titles Registry)			
2.	Packet/Instrument #	was submitted to	to the Land Registry to register an Interest/Title			
	in the name of	Incorrect Name)				
3. The application to the Land Registry referenced in Paragraph 2 was prepared in error as						
0.	(Incorrect Name) name in Saskatchewan.	has never	r existed as a registered corporate entity or business			
4.	The correct name that should appe	ear on the Interest/Title	is no	t,		
	(Incorrect Name)					
5.	(Correct Name)	is currently	y registered at the Corporate Registry and is the same	<b>;</b>		
	entity as (Incorrect Name)					
6.	I make this Affidavit to have the Co records accordingly, and for no oth		ed to allow the Registrar of Titles to amend its			
Sworn	before me at (Town/City)					
in the I	Province of					
	(Province)					
on	(Date - dd/mmm/yyyy)		Client Signature	_		
	(Signature) nmissioner of Oaths for Saskatchewa pmmission/Appointment expires	an				
-OR- Notary	/ Public for the	(Date - dd/mmm/yyyy)				
Provin						
i iOvili	(Province)					
My Co	mmission/Appointment Expires					
•	ing a Solicitor	(Date - dd/mmm/yyyy)				