

Telephone: 250 356-8626

INSTRUCTIONS:

Please type or print clearly in block letters and ensure that the form is signed and dated in ink.

- Item A** Enter the incorporation number and name of the company at the time the company was dissolved. The incorporation number and name would be shown on the company's Certificate of Incorporation, Amalgamation, Continuation or Change of Name.
- Item B** Enter the name reserved for the company. This may be the same as the company name at the time it was dissolved, or, if that name is not available, a new reserved name. Or, indicate the company is to be restored by adding "B.C. Ltd." to its incorporation number.
- Item C** If the applicant is a corporation or firm, enter the full name of the corporation or firm.
- Item D** Complete Item G and H if the restoration has **not** been approved by the court.
- Item G** Enter the date the restoration is to expire. If no date is entered, the company will be dissolved two years (24 months) after the date it is restored.
- Item H** Complete Item I if the restoration has been approved by the court.
- Item I** If the applicant is a corporation or firm, this form must be signed by an authorized signing authority for the corporation or firm.

Filing Fee: \$350.00

Submit this form with a cheque or money order made payable to the Minister of Finance, or provide the registry with authorization to debit the fee from your BC OnLine Deposit Account. Please pay in Canadian dollars or in the equivalent amount of US funds.

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the *Business Corporations Act* for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Executive Coordinator of the BC Registry Services at 250 356-1198, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

OFFICE USE ONLY – DO NOT WRITE IN THIS AREA

A INCORPORATION NUMBER OF COMPANY TO BE RESTORED

B NAME OF COMPANY AT THE TIME OF DISSOLUTION

C NAME RESERVED FOR THE COMPANY TO BE RESTORED – Choose *one* of the following:

- The name _____ is the name reserved for the company to be restored. The name reservation number is _____, *OR*
- The company is to be restored with a name created by adding "B.C. Ltd." after the incorporation number of the company.

D FULL NAME OF APPLICANT

LAST NAME FIRST NAME MIDDLE NAME

CORPORATION OR FIRM NAME

E MAILING ADDRESS OF APPLICANT

PROVINCE/STATE COUNTRY POSTAL CODE/ZIP CODE

F TRANSLATION OF COMPANY NAME

Set out every translation of the company name that the company intends to use outside of Canada.

COMPLETE ITEMS G AND H FOR A RESTORATION TO BE APPROVED BY THE REGISTRAR OR ITEM I FOR A RESTORATION APPROVED BY COURT ORDER.

G DATE OF RESTORATION – Complete this Item and Item H if restoration is to be approved by the registrar.

The company will not be restored until 21 days after the later of the following two dates (both dates must be entered):

The date the Notice of the Application for Restoration was published in the BC Gazette.

YYYY / MM / DD

The date the Notice of the Application for Restoration was mailed to the company.

YYYY / MM / DD

H EXPIRY DATE OF THE LIMITED PERIOD OF RESTORATION – Complete this Item and Item G if restoration is to be approved by the registrar.

The expiration of the limited period of restoration will be two years from the date the company is restored unless otherwise specified below:

Less than 6 months _____
(number of months)

6 months from the date the company is restored

12 months from the date the company is restored

18 months from the date the company is restored

I DATE OF RESTORATION – Complete this Item if restoration is approved by court order.

I have obtained a copy of an entered court order approving the restoration.

Length of time of the limited restoration as specified in the court order is _____
(number of months)

J CERTIFIED CORRECT – I have read this form and found it to be correct.

NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE SIGNED

YYYY / MM / DD

X