

Change of Business Name, Director(s), Shareholder(s) or

Authorized Person(s) 更改商號名稱、董事、股東或獲授權人士

To: Celestial Securities Limited / Celestial Commodities Limited / Celestial Finance Limited

致:時富證券有限公司/時富商品有限公司/時富財務有限公司

Please post your completed form to **Client Services Department**, **22/F**, **Manhattan Place**, **23 Wang Tai Road**, **Kowloon Bay**, **Hong Kong** or by visiting the Services Centres of CASH Financial Services Group. Your request will be processed within 2 working days upon receipt of the duly completed form. For inquiries, please do not hesitate to contact us at (**852**) **2663 8888**. 請將已填妥的表格郵寄至**香港九龍灣宏泰道 23 號 Manhattan Place 22 樓客戶服務部**或交回時富金融 服務集團各服務中心。本公司將在收到填妥的表格後兩個工作天內處理您的申請。如欲查詢,請致雷(**852**) **2663 8888** 與客戶服務部職終。

服務集團各服務中心	。本公司將在收到填妥的表格後	兩個工作天內處理您的	月申請。如欲查詢,請	青致電(852) 2663 8888 與客戶服務部聯絡。			
	ify you of changing our bus l貴公司更改吾等之商號名						
	English 英文						
New Business Na 新商號名稱	me Chinese 中文	Chinese 中文					
	practicing solicitor or 0	Please attach a certified true copy of new Certificate of Incorporation and Business Registration Certificate (if applicable) by practicing solicitor or CPA together with a revised resolution showing new specimen company chop. 請附上經執業律師或註冊會計師核實之新公司註冊證書及商業登記證(如適用)副本及附有新公司印鑑式樣之董事決議案。					
— 吾等謹此通知	ify you of changing our dire l貴公司更改吾等之董事:	, ,					
and current 3-month r	esidential address proof of new dir	ectors. New directors sho	uld sign a personal gua	l true copies of ID or Passport by practicing solicitor or CPA arantee. 图月內之住址證明。新董事需要簽妥個人擔保書。			
	ify you of changing our sha 情公司更改吾等之股東:	reholder(s):					
請附上經執業律師或 Please attach a new O	d true copy of new Register of Me 注冊會計師核實之新股東資料區 wnership Chart with director's dec 擁有人之公司擁有權的最新圖表]本。 laration indicating the ult		ñcial owners			
吾等謹此通知	ify you of changing our aut 貴公司更改吾等之獲授權	人士:					
the new authorized pe	rsons by practicing solicitor or CP	A.		men signatures and certified true copies of ID or Passport of 以註冊會計師核實之新獲授權人士身份證或護照副本。			
Client Signature(s) 客戶簽署	★ Please use the signature(s) field w 請用留存本公司之印鑑式樣	ith our company	Account No. 戶口號碼				
Client Name 客戶名稱			Date 日期	day 日 / month 月 / year 年			

For official use only 僅供職員填寫								
☐ Original ☐ Face to face	Handled by	Verified by	Approved by	Input by / scanned by	Checked by	CDD Level Unchanged / Low / Normal / High	☐ PEP YES / NO	



Change of Business Name, Director(s), Shareholder(s) or Authorized Person(s)

更改商號名稱、董事、股東或獲授權人士

New List of Authorized Signatories and Specimen Signatories 獲授權簽署人士之新名單與簽名式樣

Full Name of Signatory in English 簽署人英文姓名	ID / Passport No. 身份證/護照號碼		Specimen Signature 簽名式樣		
X 67 () () X 1	ST INTEREST PROPERTY		X 12/1X		
Signing Instruction 簽署指示		Specimen Company Chop 公司印鑑式樣			
Any # signature(s) shall be valid. 任何# 個簽名為有效。					
IEW D. 1978					

For official use only 僅供職員填寫							
☐ Original ☐ Face to face	Handled by	Verified by	Approved by	Input by / scanned by	Checked by	CDD Level Unchanged / Low / Normal / High	☐ PEP YES / NO
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