



Companies By  
Quorum Services Pty Ltd

Ph: 07 5574 0698

PO Box 288 Nerang QLD 4211

www.quorum-services.com.au

info@quorum-services.com.au

Office: By Appointment Only



# Company Name Change

Firm (if any) \_\_\_\_\_ Date \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Phone \_\_\_\_\_  
 Email \_\_\_\_\_ Ref No. \_\_\_\_\_

COMPANIES BY QUORUM SERVICES PTY LTD provides a document preparation and registration service. COMPANIES BY QUORUM SERVICES PTY LTD does not provide legal or professional advice. Any person wishing to complete this procedure should obtain advice from a legal practitioner or accountant to ensure the change is suitable for its intended use.

## Section A - Each item must be completed

COMPANY NAME \_\_\_\_\_  
 ACN \_\_\_\_\_  
 NEW COMPANY NAME \_\_\_\_\_

Common seal required  No  Yes (Additional fee - see current fee schedule)

## Section B - Officers who will be present and all shareholders entitled to vote.

(If possible all shareholders should be present to allow for agreement to short notice)  
 Surname & given names of individuals name & ACN for companies.

|       | Director                 | Shareholder              |
|-------|--------------------------|--------------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> |

(If a shareholder is a company give company name, ACN and the name of the person representing the company)

## Section C - Meeting (Please provide full address and date)

Location of meeting \_\_\_\_\_  
 Date of meeting \_\_\_\_\_ Time \_\_\_\_\_  
 Directors \_\_\_\_\_  
 Shareholder \_\_\_\_\_  
 Chairperson \_\_\_\_\_

21 Days notice required (Unless this box is ticked we will assume all Shareholders will agree to the meeting being held on short notice.)