

BOARD RESOLUTION

CERTIFIED TRUE COPY OF THE MINUTES OF THE BOARD MEETING OF **XXXXXX PVT. LTD.** held on OF 201 AT THE REGISTERED OFFICE OF THE COMPANY WHERE PROPER QUORUM WAS PRESENT

“RESOLVED THAT the Company would open and operate a trading account in the name and style of **XXXXXX PVT LTD.** with **CENTRUM FINVERSE LTD (CFL)**, SEBI registered stock broker of the Bombay Stock Exchange Ltd. (BSE), SEBI registered stock broker of National Stock Exchange of India Limited (NSE) for the purpose of dealing/trading and investing in securities and derivatives contracts in the stock market.

“FURTHER RESOLVED THAT the Company would open and operate a depository account in the name and style of **XXXXXX PVT LTD** with **CENTRUM FINVERSE LTD (CFL)**, SEBI registered Depository Participant of Central Depository Services (India) Limited (CDSL) for the holding/transferring securities bought/sold/traded and or invested in the name of the Company.

“RESOLVED FURTHER THAT following person be and is hereby authorized **severally to sign**, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary to open and operate the account.”

| Sr.No. | Name | Designation | Specimen Signature |
|---------------|-------------|--------------------|---------------------------|
| 1. | | Director | |
| 2. | | Director | |

RESOLVED FURTHER THAT that this resolution would remain effective and in force till a fresh resolution canceling or amending the above details would be passed by the Board of Directors of the Company and furnished to **CENTRUM FINVERSE LTD (CFL)**.

RESOLVED FURTHER THAT all Director of the Company be and are hereby authorized to give certified true copies of this resolution to **CENTRUM FINVERSE LTD (CFL)**.

CERTIFIED TRUE COPY

For **XXXXXX PVT. LTD**

Director

Place:

Date:

CIN :

AUTHORISED SIGNATORY LIST

The following person/s be and are hereby authorized to sign either jointly or **severally**, whose specimen signatures are appended below

| Sr.No. | Name | Designation | Specimen Signature |
|---------------|-------------|--------------------|---------------------------|
| 1. | | Director | |
| 2. | | Director | |

CERTIFIED TRUE COPY

For **XXXXXXX PVT. LTD**

Director

Place:

Date:

CIN: