**Date:**

**MCIL INTERNATIONAL LTD**

Suite 3A, Unit 3A-2, Level 3A,

Labuan Times Square, Jalan Merdeka

87000 W.P Labuan,

Malaysia.

Attn to: Board of Directors of MCIL International Ltd

Dear Sir/Madam,

**RE: REQUEST TO CHANGE BENEFICIARY**

I,  **,** being the Preference Shareholder of MCIL Intl Ltd, wish to change my beneficiary details for my investment ID: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Kindly refer to the attached beneficiary form for the details of my new designated beneficiary and the ID of my beneficiary.

I hereby confirm that the above request is made with the effective date of  **.**

Thank you.

Sincerely,

Name:  
Date:

**Name and Particulars of Beneficiary (受益人姓名和资料)**

In the event of my death, I designate the following as my BENEFICIARY 1 for \_\_\_\_\_\_\_\_\_% and BENEFICIARY 2 for \_\_\_\_\_\_\_%. All amount Capital Sum including dividend / interest that may be payable after my death:

(一旦本人逝世，本人指定以下人士为本人的第一受益人，能继承全额资本总额的 \_\_\_\_\_\_\_\_\_\_\_\_\_ %，以及第二受益人，能继承全额资本总额的 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ %。在本人逝世后，包括股息或利息在内的全额资本总额应支付予：)

**BENEFICIARY 1 (第一受益人)**

|  |  |
| --- | --- |
| **Name (as per NRIC/Passport)**  **姓名（如同身份证件/护照）** |  |
| **Address**  **（地址）** | **Postcode（邮编）: Mobile No.（手机号码）:**  **Country (国家):**  **Email（电邮地址）:** |
| **NRIC/Passport No. （身份证件/护照号码）** |  |
| **Nationality (国籍)** |  |
| **Occupation (职业)** |  |
| **Date of Birth (出生日期) - DD-MM-YYYY** |  |

**Payment Instruction for Redemption (赎回指示)**

|  |  |
| --- | --- |
| **Please make payment in the name of**  **（请将赎回金额支付予）** | *(Must be the name of the Beneficiary 1 - 必须是第壹受益人的姓名)* |

**Relationship to Applicant (与申请人的关系) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BENEFICIARY 2 (第二受益人)**

|  |  |
| --- | --- |
| **Name (as per NRIC/Passport)**  **姓名（如同身份证件/护照）** |  |
| **Address**  **（地址）** | **Postcode（邮编）: Mobile No.（手机号码）:**  **Country (国家):**  **Email（电邮地址）:** |
| **NRIC/Passport No. （身份证件/护照号码）** |  |
| **Nationality (国籍)** |  |
| **Occupation (职业)** |  |
| **Date of Birth (出生日期) - DD-MM-YYYY** |  |

**Payment Instruction for Redemption (赎回指示)**

|  |  |
| --- | --- |
| **Please make payment in the name of**  **（请将赎回金额支付予）** | *(Must be the name of the Beneficiary 2 - 必须是第*贰*受益人的姓名)* |

**Relationship to Applicant (与申请人的关系) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Any specific instructions (if any) kindly write in to the Company (任何具体说明（如有）请以书信通知公司)