

Certificate of	CD	
Incorporation No.	CP	

## COOPERATIVE ASSOCIATION ACT

## **SPECIAL RESOLUTION**

The following special resolution was passed by the undermentioned association on the date stated:

FULL NAME OF ASSOCIATION DATE RESOLUTION PASSED YYYY / MM / DD

RESOLUTION (Insert text of special resolution)

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

NAME OF CURRENT DIRECTOR, OFFICER OR LAWYER OF THE ASSOCIATION (Please print)

SIGNATURE OF CURRENT DIRECTOR, OFFICER OR LAWYER OF THE ASSOCIATION

DATE SIGNED
YYYY / MM / DD



## Note:

- No special resolution altering the memorandum or rules has effect until accepted by the Registrar of Companies.
- Submit this form, in duplicate, to the Corporate Registry, together with the\$70 filing fee or \$100 filing fee for Change of Name.
   Mailing Address: PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.
   Courier Address: 200 940 Blanshard Street, Victoria BC V8W 3E6.
   Make cheque or money order payable to the Minister of Finance, or provide the Corporate Registry with authorization to debit the fee from your BC OnLine Deposit Account. Please pay in Canadian dollars or in the equivalent amount of U.S. funds.
- Enquiries: 1 877 526-1526.
- Additional information and forms are available on the Internet at: www.bcreg.ca

## 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 *Cooperative Association Act* for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Manager of Registries Operations at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.