#### SPICe + Part B

# Simplified Proforma for Incorporating Company Electronically

[Purusant to sections 4, 7, 8(1) 12, 152 and 153 of the Companies Act, 2013 read with rules made there under] - Form No. INC-32



Form	Languag
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English

 $\bigcap \mathsf{Hindi}$ 

Refer instruction kit for filling the form
All fields marked in * are mandatory.

Structure of	the Company				
1(a) *Whether	AOA is entrenched?				<ul><li>No</li></ul>
(b) Number o	of Articles to which provisi	ons of enternchment			
Details of suc	ch articles				
Sr. No	Article Number	Short desc	ription on entrenchment of	the clause	
1					
2 *Company i	S				
<ul><li>Having Sha</li></ul>	are Capital				
○ Not having	g share capital				
Total authoriz	zed share capital (in INR)			100000	
Total classifie	d authorized share capita	l (in INR)		100000	
Total subscrib	ped share capital (in INR)			30000	
*Total unclas	sified authorized share ca	oital (in INR)		0	
3A(i) *Equity	share capital				
Number of cl	asses			1	
Description of	of Equity share capital				
3A *Capital s	tructure of the company	,			
CI	ass of shares	Authorizad const-1	Cooks a suit	had assital	
	FOLIITY	Authorized capital	SUDSCIII	bed capital	

10000

10

100000

#### 3A(ii) \*Preference share capital

Nominal amount per share (in INR)

Number of classes

Number of equity shares

Total amount (in INR)

0

3000

10

30000

Line 2 *Pin code	DCG1-2121 DLF CORPORATE GREENS SEC-74A, GURGAON
otal amount (in INR)  B *Details of number of members  (a) Enter the maximum number of members  (b) Maximum number of members excluding proposed employees  (c) Number of members  (d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details: Mobile No.	DCG1-2121 DLF CORPORATE
B *Details of number of members  (a) Enter the maximum number of members  (b) Maximum number of members excluding proposed employees  (c) Number of members  (d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details : Mobile No.	
(a) Enter the maximum number of members  (b) Maximum number of members excluding proposed employees  (c) Number of members  (d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details: Mobile No.	
(b) Maximum number of members excluding proposed employees  (c) Number of members  (d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details: Mobile No.	
(c) Number of members  (d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details : Mobile No.	
(d) number of members excluding proposed employee(s)  4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details : Mobile No.	
4 Address of the Company  4A *Correspondance Address  *Line 1  Line 2  *Pin code  Contact Details : Mobile No.	
*Line 1 Line 2 *Pin code Contact Details: Mobile No.	
*Line 1 Line 2  *Pin code  Contact Details : Mobile No.	
*Pin code  Contact Details : Mobile No.	
*Pin code Contact Details : Mobile No.	GREENS SEC-74A, GURGAON
Contact Details : Mobile No.	
	122004
Contact Details: Phone No. (with STD code)	81****45
*State/UT	Haryana
*District	Gurgaon
*City	Narsinghpur
*Area/Locality	Narsinghpur
Fax	
email ID of the company	Ag*******il.com

4B *Whether the address for correspondence is the address of registered office of the company	<ul><li>Yes</li><li>No</li></ul>
(In case Yes is selected, please provide Longitude and Latitude details)	
Longitude	77.045441
Latitude	28.472191
Attachments:	
<ol> <li>Proof of Office address along with NOC, if applicable (Conveyance/ Lease deed /Rent Agreement along with rent receipts);</li> </ol>	DOD FISH.pdf
Electricity_Bill 2. Copy of the utility bills (not older than two months);	pdf
4C *Name of the office of the Registrar of Companies in which the proposed company is to be registered  Registrar of Companies, Na	ational Capital Territory of Delhi and Haryana

#### 5 \*Number of first subscriber(s) to MOA and directors of the company

	Having valid DIN	Not having valid DIN
(a) Total number of first subscribers (non-individual + individual)	2	1
(b) Number of non -individual first subscriber(s)		1
(c) Number of individual first subscriber(s) cum director(s)	2	0
(d) Total number of directors (director(s) who Is/are not subscriber(s) + subscriber(s) cumdirector(s) as mentioned in above Row no. 3)	4	0

### 6 Particulars of Non-Individual Subscribers / Individual Subscribers other than Subscriber(s) cum Directors 6A \*Particulars of non-individual first 6A(i) Particulars of entity Company \*Category Company/Foreign company/ Company incorporated outside India Body Corporate/Others) \*Corporate identity number (CIN) or foreign company registration U64200HR2023PTC114590 number (FRCN) or any othr registration number \*Name of the body corporate NUSURGE HOLDINGS PRIVATE LIMITED Registered office address or Principal place of business in India or Principal place of business outside India \*Line 1 1602,16TH FLOOR TOWER NO. Line 2 D PARK VIEW SPA SECTOR-47 India \*Country \*Pin code 122018 Area/Locality Gurgaon \*City Gurgaon District Gurgaon \*State/UT Haryana \*Phone (with STD/ISD code) Fax Ag\*\*\*\*\*\*\*\*\*\*\*\*il.com \*email ID of the company 6A(ii) Particular of the person authorized by the Director Identification number (DIN) 10155969 SHOBHIT \*First Name Middle Name \*Surname GAUR TITAKSH \*Father's First Name Father's Middle Name \*Father's Surname SHARMA \*Gender Male (Male/Female/Transgender)

*Date of Birth (DD/MM/YYYY)	20/06/1985
*Nationality	India
Income tax-PAN	APIPG6999P
*Place of Birth (District & State)	New Delhi
*Occupation type	
(Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
*Area of Occupation	
*If 'Others' selected, please specify	
*Educational Qualification	
Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
Present Address	
*Line 1	D-1602, Bestech Park View
Line 2	
Line 2	Sector 47
*Country	Sector 47 India
*Country	India
*Country *Pin code	India 122018
*Country  *Pin code  *Area/Locality	India 122018 Gurgaon
*Country  *Pin code  *Area/Locality  *City	India 122018 Gurgaon Gurgaon
*Country  *Pin code  *Area/Locality  *City  District	India  122018  Gurgaon  Gurgaon  Gurgaon
*Country  *Pin code  *Area/Locality  *City  District  *State/UT	India  122018  Gurgaon  Gurgaon  Gurgaon
*Country  *Pin code  *Area/Locality  *City  District  *State/UT  *Phone (with STD/ISD code)	India  122018  Gurgaon  Gurgaon  Gurgaon
*Country  *Pin code  *Area/Locality  *City  District  *State/UT  *Phone (with STD/ISD code)  Fax	India 122018 Gurgaon Gurgaon Gurgaon
*Country  *Pin code  *Area/Locality  *City  District  *State/UT  *Phone (with STD/ISD code)  Fax  email ID of the company	India  122018  Gurgaon  Gurgaon  Gurgaon
*Country  *Pin code  *Area/Locality  *City  District  *State/UT  *Phone (with STD/ISD code)  Fax  email ID of the company  *Identity Proof	India 122018 Gurgaon Gurgaon Gurgaon

(Voter Identity Card/Passport/Driving License/.	Aadhaar)	
*Residential Proof No.		
Submit the proof of identity and p address (a) *Proof of identity	roof of	
(b) *Residential Proof		
Description of Share capital		
Total subscribed share capital (in INR)		13500
Description of equity share capita		
*Number of classes		1
Trainibor of classes		·
Class of shares		Subscribed conital
EQUITY		Subscribed capital
Number of equity shares		1350
Nominal amount per share (in INR)		10
Normal amount per share (in hin)		10
Total amount (in INR)	nital	13500
	pital	
Total amount (in INR)  Description of preference share ca	pital	
Total amount (in INR)  Description of preference share ca  *Number of classes  Class of shares	pital	13500
Total amount (in INR)  Description of preference share ca *Number of classes  Class of shares  Number of preference shares	pital	13500
Total amount (in INR)  Description of preference share ca  *Number of classes  Class of shares	pital	13500

6B Particulars of individual first sub	oscriber(s) other than subscriber cum director (having valid DIN)
*Director Identification Number (DIN)	
*Name	
Description of Share capital	
Total subscribed share capital (in INR)	
Description of equity share capital	
*Number of classes	
Class of shares	Subscribed capital
Number of aguity shares	
Number of equity shares	
Nominal amount per share (in INR)	
Total amount (in INR)	
Description of preference share cape *Number of classes	ital
Class of shares	Subscribed capital
Number of preference shares	
Nominal amount per share (in INR)	
Total amount (in INR)	
Total amount (in many	

6C *Particulars of individual first subscriber(s) other than subscriber(s)	ber cum director (Not having valid
*First Name	
Middle Name	
*Surname	
*Father's First Name	
Father's Middle Name	
*Father's Surname	
*Gender (Male/Female/Transgender)	
*Date of Birth (DD/MM/YYYY)	
*Nationality	
*Place of Birth (District & State)	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
Area of Occupation	
If 'Others' selected, please specify	
*Educational Qualification	
Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
PAN	
*email ID	

Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
State/UT	
*Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	○ Yes ○ No
*Line 1	
Line 2	
*Country	
*Pin code	
Area/Locality	
*City	
District	
*State/UT	
*Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)  (Years -> 0 to 99  Month -> 0 to 11)	
*If Duration of stay at present addressis less than a one year then address of presidence	previous
*Identity Proof (Voter Identity Card/Passport/Driving License/Aadhaar)	
*Residential Proof	
(Voter Identity Card/Passport/Driving License/Aadhaar)	
*Identity Proof No.	

*Residential Proof No.	
*Submit the proof of identity and proof of	
address (a) *Proof of identity	
	1
(b) *Residential Proof	
Description of Share capital	
Total subscribed share capital (in INR)	
Description of equity share capital	
*Number of classes	
Class of shares	Subscribed capital
	ouzosi izou supitu.
Number of equity shares	
Nominal amount per share (in INR)	
Total amount (in INR)	
<u> </u>	
Description of preference share capital	
*Number of classes	
Class of shares	Subscribed capital
	Substitute capital
	Substitute cupital
Number of preference shares	Substitute cupital
Nominal amount per share (in INR)	Substituted capital
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	
Nominal amount per share (in INR)	

7 Particulars of Subscriber(s) cum Dir	rectors/Director of the Com	npany
7A Particulars of Subscriber(s) cum D	Directors (having valid DIN)	
7A(i) Basic detail of Subscriber(s) cun	n Directors	
Director Identification Number (DIN)		07961576
*Name		KAPIL MEHTA
*Designation		Director
(Director/Managing Director/Whole time director/Nomin	nee director)	
*Category (Promoter/Professional/Independent/Nominee)		Promoter
Whether		
Chairman		
Executive Director		
Non-executive Director		
*Name of the company or institution whos	e nominee the apointee is	
*email ID		ma******il.com
Description of Share capital		
Total subscribed share capital (in INR)		6750
Description of equity share capital		
*Number of classes		1
Class of shares		Subscribed capital
EQUITY		Subscribed capital
Number of equity shares		675
Nominal amount per share (in INR)		10
Total amount (in INR)		6750
Description of preference share capi	tal	
*Number of classes		
		,

Clas	ss of shares		Subscribed capital	
Number of prefer	ence shares			
Nominal amount	per share (in INR)			
Total amount (in I	NR)			
7A(ii) Declarati	on of entities in which	n Subscribers cum directors h	ave interest	
Number of entitie	es in which director has in	nterest	2	
*CIN/LLPIN/FCRN	I/Registration Number		AAL-0340	
*Name			ECOSTRUCTIVE BUILD	DERS LLP
*Address		SADAR BAZAR, NEAR REWARI SW HARYANA-122001, ,NA122001,Gu		
*Nature Of	*Designation Othe	ers	Other(specify)	DESIGNATED PARTNER
interest	Percentage of Shareho	olding 0	Amount (in INR)	
*CIN/LLPIN/FCRN	//Registration Number		ACC-0829	
*Name			IMPERIAL RIDES LLP	
*Address		714/13,Pratap Nagar,Gurgaon122	2001,Gurgaon,Haryana	
*Nature Of interest	*Designation Othe	ers	Other(specify)	DESIGNATED PARTNER
	Percentage of Shareho	olding 0	Amount (in INR)	
	of Subscriber(s) cum E ail of Subscriber(s) cur	Directors (having valid DIN)		

Director Identification Number (DIN)		07107235	
*Name		SHAILESHKUMAR KANTIBHAI PATEL	
*Designation		Director	
(Director/Managing Director/Whole time director/Nom	inee director)		
*Category		Promoter	
(Promoter/Professional/Independent/Nominee)			
Whether			
Chairman			
Executive Director			
Non-executive Director			
*Name of the company or institution who	se nominee the apointee is		
*email ID		sh*****oo.com	
Description of Share capital			
Total subscribed share capital (in INR)		9750	
Description of equity share capital			
*Number of classes		1	
Class of shares		Cubacuita de amitad	
EQUITY		Subscribed capital	
Number of equity shares		975	
Nominal amount per share (in INR)		10	
Total amount (in INR)		9750	
Description of professions shows and	L-1		
Description of preference share capi	tai		
*Number of classes			
Class of shares			
		Subscribed capital	
Number of preference shares			
Nominal amount per share (in INR)			
Total amount (in INR)			
	·		

number of ent	ities in which directo	r has interest		1	
CIN/LLPIN/FCI	RN/Registration Num	ıber		U72900HR2013PTC050134	
<sup>*</sup> Name				BABYLONIAN TECHNOLOG	ies (India) private
*Address		2121, T-1 DLF COR	2121, T-1 DLF CORPORATE GREENS,SECTOR-74A,Narsinghpur122004,Gurgaon,Haryana		
Nature Of	*Designation	Director		Other(specify)	
nterest	Percentage of S			Amount (in INR)	

## 7B Particulars of Subscriber(s) cum Directors (Not having valid 7B(i) Basic detail of Subscriber(s) cum Directors \*First Name Middle Name \*Surname \*Father's First Name Father's Middle Name \*Father's Surname \*Gender \*Date of Birth (DD/MM/YYYY) \*Nationality \*Place of Birth (District & State) Whether citizen of India Yes $\bigcirc$ No Whether resident in India $\bigcirc$ No \*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) \*Area of Occupation If 'Others' selected, please specify \*Educational Qualification If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) PAN \*Designation (Director/Managing Director/Whole time director/Nominee director) \*Category

(Promoter/Professional/Independent/Nominee)	
Whether  ☐ Chairman ☐ Executive Director ☐ Non-executive Director	
*Name of the company or institution whose nominee the apointee is	
*Mobile No	
*email ID	
Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	○ Yes ○ No
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
State/UT	
Phone (with STD/ISD code)	

Duration of stay at present address (Years)	/Month)	
(Years -> 0 to 99 Month -> 0 to 11)		,
*If Duration of stay at present addressis les residence	ss than a one year then address of	previous
*Identity Proof		
(Voter Identity Card/Passport/Driving License/Aad	dhaar)	
*Residential Proof		
(Voter Identity Card/Passport/Driving License/Aad	dhaar)	
*Identity Proof No.		
Residential Proof No.		
*Submit the proof of identity and pr address	oof of	,
(a) *Proof of identity		
(b) *Residential Proof		
Description of Share capital		
Total subscribed share capital (in INR)		
Description of equity share capital		
*Number of classes		
Class of shares		Subscribed capital
Number of equity charge		
Number of equity shares		
Nominal amount per share (in INR)		
Total amount (in INR)		
Description of preference share capi	ital	
*Number of classes		
Class of shares		Subscribed capital
		•
Number of preference shares		
Nominal amount per share (in INR)		
Total amount (in INR)		

	tition of entities in which Subscribers cum directors tities in which director has interest	have interest
*CIN/LLPIN/FCI *Name *Address	RN/Registration Number	
*Nature Of interest	*Designation  Percentage of Shareholding 0	Other(specify)  Amount (in INR)
	1	

7C Particulars	of Directors (having valid DIN)	
7C(i) Basic Det	ails of Directors	
*Director Identif	ication Number (DIN)	10155969
*Name		SHOBHIT GAUR
*Designation (Director/Managing D	Director/Whole time director/Nominee director)	Director
*Category (Promoter/Profession	al/Independent/Nominee)	Professional
Whether  ☐ Chairman  ☑ Executive Dir ☐ Non-executive		
Name of the con	npany or institution whose nominee the apointee is	
*email ID		Sh*******il.com
7C(ii) Declarat	ion of entities in which Subscribers cum directors ha	ave interest
Number of entit	ies in which director has interest	2
	N/Registration Number	U47820HR2023PTC111519
*Name		SOCK STREET INDIA PRIVATE LIMITED
*Address		D-1602, Bestech Park View,Sector-47,Gurgaon122018,Gurgaon,Ha ryana,India
*Nature Of interest	*Designation Director  Percentage of Shareholding 0	Other(specify)  Amount (in INR)
*CIN/LLPIN/FCRI	N/Registration Number	U64200HR2023PTC114590
*Name		NUSURGE HOLDINGS PRIVATE LIMITED

*Address			1602,16TH FLOOR TOWER NO.,D PARK VIEW SPA SECTOR-47,Gurgaon122018,Gurgaon,Haryan a,India
*Nature Of interest	*Designation	Director	Other(specify)
interest	Percentage of S	Shareholding 0	Amount (in INR)
7C Particulars	of Directors (hav	ving valid DIN)	
7C(i) Basic Deta	ails of Directors		
*Director Identifi	cation Number (DI	N)	07622148
*Name			MICHELLE AGARWAL
*Designation (Director/Managing D	irector/Whole time direc	tor/Nominee director)	Director
*Category (Promoter/Professiona	nl/Independent/Nominee	e)	Professional
Whether  ☐ Chairman ☐ Executive Direction ☐ Non-executive			
Name of the com	pany or institutior	n whose nominee the apointee	is
*email ID			mi*********il.com
7C(ii) Declarati	on of entities in	which Subscribers cum di	rectors have interest
Number of entition	es in which directo	r has interest	4
*CIN/LLPIN/FCRN	I/Registration Num	nber	U47820HR2023PTC111519
*Name			SOCK STREET INDIA PRIVATE LIMITED
*Address			D-1602, Bestech Park View,Sector-47,Gurgaon122018,Gurgaon,Ha ryana,India

*Nature Of interest	*Designation Director	Other(specify)
	Percentage of Shareholding 0	Amount (in INR)
*CIN/LLPIN/FCI	RN/Registration Number	U64200HR2023PTC114590
*Name		NUSURGE HOLDINGS PRIVATE LIMITED
*Address		1602,16TH FLOOR TOWER NO.,D PARK VIEW SPA SECTOR-47,Gurgaon122018,Gurgaon,Harya a,India
*Nature Of interest	*Designation Director	Other(specify)
linterest	Percentage of Shareholding 0	Amount (in INR)
*CIN/LLPIN/FCI	RN/Registration Number	AAH-7895
*Name		TWF SHORING INDIA LLP
*Address		D-31 SOUTH EXTENSION PART- I,,NA110049,South Delhi,Delhi,India
*Nature Of interest	*Designation Others	Other(specify) DESIGNATED PARTNER
	Percentage of Shareholding 0	Amount (in INR)
*CIN/LLPIN/FCI	RN/Registration Number	AAX-4320
*Name		SUGERO INDIA LLP
*Address		133 COTTON STREET,,NA700007,Kolkata,West Bengal,Ind

ature Of erest	*Designation Others	Other(specify)	DESIGNATED PARTNER
	Percentage of Shareholding 0	Amount (in INR)	

7D Particulas of Directors (Not having DIN) 7D(i) Basic detail of Directors	
*First Name	
Middle Name	
*Surname	'
*Father's First Name	
Father's Middle Name	
*Father's Surname	
*Gender	
*Date of Birth (DD/MM/YYYY)	
*Nationality	
	,
*Place of Birth (District & State)	
Whether citizen of India	
Whether resident in India	
Whether resident in India *Occupation type	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation If 'Others' selected, please specify	
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation  If 'Others' selected, please specify  *Educational Qualification	Yes No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation  If 'Others' selected, please specify  *Educational Qualification  If 'Others' selected, please specify  Primary education/Secondary education/Vocational qualification  Bachelor's degree/Master's degree/Doctorate or higher/Professional	Yes No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation  If 'Others' selected, please specify  *Educational Qualification  If 'Others' selected, please specify  Primary education/Secondary education/Vocational qualification  Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)	Yes No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation  If 'Others' selected, please specify  *Educational Qualification  If 'Others' selected, please specify  Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)  Income tax-PAN	Yes No
*Occupation type (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)  *Area of Occupation  If 'Others' selected, please specify  *Educational Qualification  If 'Others' selected, please specify  Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others)  Income tax-PAN  *Designation	Yes No

Whether  ☐ Chairman ☐ Executive Director ☐ Non-executive Director	
*Name of the company or institution whose nominee the apointee is	
*Mobile No	
*email ID  Permanent	
*Line 1	
Line 2	
*Country	
*Pin code	
Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	○ Yes ○ No
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	

(Years -> 0 to 99 Month -> 0 to 1		
If Duration of saddress of prev	tay at present addressis less than a one year then vious residence	
*Identity Proof		
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	
*Residential Pr	oof	
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	
*Identity Proof	<sup>-</sup> No.	
Residential Pro	oof No.	
*Submit the paddress	proof of identity and proof of	
(a) *Proof of ide	entity	
(b) *Residentia	Proof	
7D(ii) Declara	ation of entities in which directors have interest	
Number of ent	ities in which director has interest	
*CIN/LLPIN/FCI	RN/Registration Number	
*Name	S	
rumo		
*Address		
Address		
*Nature Of	*Designation	Other(specify)
interest	Percentage of Shareholding 0	Amount (in INR)

8 OPC Nomination  8 A *Nomination  1 *	the subscribertothe memorandum of association of
do hereby nominate *	*
who shall become the member of the company in the event of my death or	incapacity to contract. I declare that the nominee is
eligible for nomination within the meaning of Rule 3 of the Companies (Inco	orporation) Rules, 2014.
8B *Particulars of the Nominee	
Director Identification number (DIN)	
( )	
*First Name	
Middle Name	
made Name	
*Surname	
*Father's First Name	
Tuther Strist Nume	
Father's Middle Name	
*Father's Surname	
Tather 3 Juniane	
*Gender	
*Date of Birth (DD/MM/YYYY)	
*Nationality	
*Income tax-PAN	
IIICOME (ax-PAN	
*Place of Birth (District & State)	
*Occupation type	
*Occupation type	
Business/Professional/Government/Employment/Private Employment /Housewife Student/Others	
*Area of Occupation	

If 'Others' selected, please specify	
*Educational Qualification	
(Primary education/Secondary education/Vocational qualification Bachelor's degree/master's degree/Doctorate or higher/Professional Diploma/Others)	
If 'Others' selected, please specify	
*Mobile No	
*Email Id	
Permanent address	
*Line 1	
Line 2	
*Country	
*Area/ Locality	
*Pin code / Zip Code	
*State/UT	
*City	
District	
Phone (with STD/ISD code)	
Fax	
Whether present residential address same as permanent residential address	○ Yes ○ No
*Present Address	

*Line 1	
Line 2	
*Area/Locality	
*Pin code	
*Country	
*City	
State / UT	
District	
Phone(with STD/ISD code)	
Fax	
Duration of stay at present address (Years/Month)	
(Year -> 0 to 99) (Month -> 0 to 11)	
*If Duration of stay at present address is less than one year then address of previous residence	
*Identity Proof	
(Voters Identity Card/ Passport/Driving License/Aadhaar)	
*Residential Proof	
(Voters Identity Card/ Passport/Driving License/Aadhaar)	

*Identity Proof No.					
*Residential Proof No.					
		,			
*Submit the proof of identity and proof	of address				
(a) *Proof of identity	MAX 2MB	MAX 2MB			
(b) *Residential proof	(b) *Residential proof		MAX 2MB		
Declaration by Nominee					
I do solemnly declare that I am an Indian cit with the promotion, formation or managen or of any breach of duty to any company ur declare that	nent of any company or	LLP and have not been for	und guilty of any fraud or misfeasance		
I am not a nominee in any other One Person Company and I shall comply with the eligibility criteria specified in Rule 3(3) within the prescribed period. I understand that the person nominating me may withdraw my nomination without my consent.					
To be digitally signed by Nominee					
9 Particulars of payment of stamp duty					
9A State or union territory in respect of which stamp duty is paid or to be paid  Haryana					
9B *Whether stamp duty is to be paid electronically through MCA 21 system					
Yes No	○ Not applicable				
9B(i) Details of stamp duty to be paid					
Type of document/ Particulars	Form	Memorandum of association	Articles of association		
Amount of stampduty to be paid (in Rs.)	15	60	60		

Particulars	Form	Memorandum of association	Articles of association	Others
otal amount of stamp uty paid (in Rs.)				
Node of payment of stamp luty				
ame of vendor or easury or Authority or ny other competent gency authorized to ollect stamp duty or to ell stamp papers or to mboss the document or o dispense stamp ouchers on behalf of the overnment				
erial number of mbossingor stampsor tamppaper or treasury hallannumber				
egistration number of endor				
ate of purchase of stamps r stamp paper or ayment of stamp duty DD/MM/YYYY)				
lace of purchase of amps or stamp paper or ayment of stamp duty				
r stamp paper or ayment of stamp duty DD/MM/YYYY) lace of purchase of amps or stamp paper or ayment of stamp duty  *Additional Information IN)  ormation specific to PAN				etion Account Number
Area Cada	AO ty	ype Ra	nge Code	AO No.
Area Code				
NWR	W		53	3
	I.		53	3
NWR	I.	/pe Ra	nge Code	AO No.
NWR nformation specific to	TAN	ype Ra		
NWR  nformation specific to  Area Code  NWR	TAN AO ty	/pe Ra	nge Code	AO No.
NWR  nformation specific to  Area Code	TAN AO ty	/pe Ra	nge Code	AO No.

*Business/Profession code	20			
Attachments				
(a) Memorandum of association	MAX 2MB			
(b) Articles of association	MAX 2MB			
<ul><li>(c) Declaration by first subscriber(s) and director(s);</li><li>(Affidavit is not required to be attached);</li></ul>	MAX 2MB			
(d) Copy of certificate of incorporation of the foreign body corporate and resolution passed by foreign company or authority given through	MAX 2MB			
constitutional document; (e) Resolution passed by promoter company;	NUSURGE HOLDINGS PRIVATE LIMITED-1_BR.pdf			
(f) Interest of first director(s) in other entities	MAX 2MB			
(g) Optional attachment(s) (if any)	MERGED DOCUMENTS FINAL DAM GOOD FISH.pdf			
Declaration	l			
Declaration  ☐ I have gone through the provisions of the Companies Act, 2013, the ru thereunder in respect of reservation of name, understood the meaning the	reof and the proposed name is in conformity thereof.			
I have used the search facilities available on the portal of the Ministry of Corporate Affairs (MCA) for checking the resemblance of the proposed name with the companies and Limited Liability partnerships (LLPs) respectively already registered or the names already approved. I have also used the search facility for checking the resemblances of the proposed name with registered trademarks and trade mark subject of an application under the Trade Marks Act, 1999 and other relevant search for checking the resemblance of the proposed name to satisfy myself with the compliance of the provisions of the Act for resemblance of name and Rules thereof.				
The proposed name is not in violation of the provisions of Emblems and Names (Prevention of Improper Use) Act, 1950 as amended from time to time.				
The proposed name is not offensive to any section of people, e.g. proposed name does not contain profanity or words or phrases that are generally considered a slur against an ethnic group, religion, gender or heredity.				
The proposed name is not such that its use by the company will constit	tute an offence under any law for the time being in			
force. I undertake to be fully responsible for the consequences in case the name is subsequently found to be in contravention of the provisions of section 4(2) and section 4(4) of the Companies Act, 2013 and rules thereto and I have also gone through and understood the provisions of section 4(5) (ii) (a) and (b) of the Companies Act, 2013 and rules thereunder and fully declare myself responsible for the consequences thereof.				
SHAILESHKUMAR KANTIBHAI PATEL				
person named in the articles as a director of the company has been duly authorized by the promoters of the company to sign this form and declare that all the requirements of the Companies Act, 2013 and the rules made thereunder in respect of Director Identification Number (DIN), registration of the company and matters precedent or incidental thereto have been complied with.				
I am authorized by the promoter subscribing to the Memorandum of Association and Articles of Association and the first director(s) to give this declaration and to sign and submit this Form.				
I further declare that, company shall not commence its business, unless all the required approval from the sectoral Regulators such as RBI, SEBI etc. have been obtained.				
I further declare that the company shall not commence the business of Nidhi, unless all the required approval including the declaration be issued under section 406 of the Act have been obtained from Central Government;				

I on behalf of the promoters and the acknowledging all communications and given address at item 4 (a)of this form;				
*I, on behalf of all the first director(s declaration given herein as stated above application form for incorporation and a suppressed. All the required attachment original records maintained by the prom	e are true to the best attachments thereto as have been comple	t of my knowledge and k are correct and completetely, correctly and legib	pelief, the informa te, and nothing re ly attached to this	tion given in this integrated levant to this form has been s form and are as per the
I, on behalf of the proposed Director they are not restrained, disqualified, rem Act, 2013 including sections 164 and 164 Judicial Magistrate Court or High Court of under section 154 of the Companies Act 155, 447 and 448 read with Sections 449	noved for being appo 9, and have not beer or any other Court, a 1, 2013, and I further	ointed as Director of a con declared as proclaimed and not been already allo declare that I have read	ompany under the d offender by any otted a Director Id	e provisions of the Companies Economic Offence Court or entification Number (DIN)
I, on behalf of the proposed directors a land border with India, necessary secuthe consent.				
The MoA and AoA attached to the fo	rm in hard copy is e	xactly similar to e-MoA a	and e-AOA to be a	ttached with the form.
I hereby declare as per Rule 5(iv) of Co Part of the Act has filed all documents w		_		
NEHA GUPTA	a	Company Secretary		having Membership numbe
42443	and/or certificate	e of practice number	15745	
has been engaged to give declaration under section 7(1) (b) and such declaration is provided below.				
*To be digitally signed by director				
*DIN/PAN			07107235	
11 Declaration and Certification by F	rofessional			
NEHA GUPTA				member of
The Institute of Company Secretary of I	ndia			having office at*
OFFICE NO205, LOTUS TOWER, F-06, N	/IJAY BLOCK, LAXMI	Who is engag	ed in the formatio	n of the company
through the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that;				
i The draft memorandum and articles and 5 and rules made thereunder; at		been drawn up in confo	ormity with the pr	ovisions of sections 4
ii All the requirements of Companies a under section 7 of the Act and matte				on of the company
iii The said records have been properly relevant provisions of the Companie			f the Company ar	d maintained as per the

iv I have opened all the attachments to this form and have verified these to	be as per requirements, complete and legible;			
<ul> <li>I further declare that I have personally visited the premises of the proposed registered office given in the form at the address mentioned herein above and verified that the said proposed registered office of the company will be functioning for the busines purposes of the company (wherever applicable in respect of the proposed registered office has been given).</li> <li>It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any</li> </ul>				
found at any stage.  The draft memorandum and articles of association have been drawn up in conformity with the provisions of section 8 and rules				
made thereunder; and viii All the requirements of Companies Act, 2013 and the rules made thereunder relating to registration of the company under section 8 of the Act and matters precedent or incidental thereto have been complied with.				
To be digitally signed by				
Chartered accountant (in whole-time practice) or				
© Company secretary (in whole-time practice)				
Cost accountant (in whole-time practice) or				
Advocate				
Whether associate or fellow:				
Associate				
Membership number	42443			
Certificate of practice number	15745			
Income-tax PAN				
For office use only:				
eForm Service request number (SRN)				
eForm filing date (DD/MM/YYYY)	11/09/2023			
Digital signature of the authorizing officer				
This eForm is hereby registered				
Date of signing (DD/MM/YYYY)				

Note: Attention is drawn to the provisions of sections 7(5) and 7(6) which, inter-alia, provides that furnishing of any false or incorrect particulars of any information or suppression of any material information shall attract punishment for fraud under section 447. Attention is also drawn to provisions of section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively