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 I	Language
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English

○ Hindi

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

Structure of the Company

Nominal amount per share (in INR)

3A(ii) *Preference share capital

Total amount (in INR)

Number of classes

1(a) *Whether	r AOA is entrenched?				No
(b) Number o	of Articles to which provisio	ons of enternchment			
Details of suc	ch articles				
Sr. No	Article Number	Short descr	ription on entrenchment of	the clause	
1					
2 *Company is	S				
Having Sha	are Capital				
O Not having	g share capital				
Total authoriz	zed share capital (in INR)			1000000	
Total classifie	ed authorized share capital	(in INR)		1000000	
Total subscrib	bed share capital (in INR)			100000	
*Total unclass	sified authorized share cap	oital (in INR)		0	
3A(i) *Equity	share capital				
Number of cla	asses			1	
Description o	of Equity share capital				
3A *Capital st	structure of the company				
CI	lass of shares	Authorized capital	Subscrib	bed capital	
	EQUITY	Αυτιιοπέσα σαριταί	Judgerik	Deu capitai	
Number of eq	uity shares	100000	10	0000	

10

1000000

Page 1 of 29

10

100000

0

Number of preference shares 0 Nominal amount (in INR) 0 Br "Details of number of members (a) Enter the maximum number of members (b) Maximum number of members excluding proposed employees (c) Number of members excluding proposed employee(s) 4 Address of the Company 4A "Correspondance Address *Line 1 0 Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. 7838888080 Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City East Delhi *Area/Locality East Delhi *Area/Locality East Delhi *Fax	Nominal amount per share (in INR) Fotal amount (in INR) By *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 F-06 VIJAY BLOCK *Pin code Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City East Delhi East Delhi *Area/Locality	scribed capital
Iominal amount (in INR) Iotal amount (in INR) IB *Details of number of members (a) Enter the maximum number of members (b) Maximum number of members excluding proposed employees (c) Number of members excluding proposed employee(s) 4 Address of the Company 4A *Correspondance Address *Line 1 Line 2 F-06 VIJAY BLOCK *Pin code Contact Details: Mobile No. Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City East Delhi *Area/Locality	Total 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 F-06 VIJAY BLOCK *Pin code Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City East Delhi East Delhi *Area/Locality	
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 F-06 VIJAY BLOCK *Pin code Contact Details : Mobile No. 7838888080 Contact Details : Phone No. (with STD code) *State/UT *District East Delhi *City *Area/Locality East Delhi East Delhi *East Delhi *East Delhi *East Delhi East Delhi *East Delhi *East Delhi *East Delhi *East Delhi East Delhi East Delhi *East Delhi *East Delhi *Area/Locality	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 F-06 VIJAY BLOCK *Pin code Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *District East Delhi *City *Area/Locality East Delhi East Delhi East Delhi East Delhi	
(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 Coffice NO 205 LOTUS TOWER F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District East Delhi *City East Delhi East Delhi *Area/Locality East Delhi East Delhi East Delhi	(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 F-06 VIJAY BLOCK *Pin code Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District *City East Delhi *Area/Locality East Delhi East Delhi East Delhi	
(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 F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City East Delhi *Area/Locality East Delhi East Delhi *East Delhi *East Delhi	(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 F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District *City East Delhi *Area/Locality East Delhi East Delhi East Delhi East Delhi	
(c) Number of members (d) number of members excluding proposed employee(s) 4 Address of the Company 4A *Correspondance Address *Line 1 Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *District *City *Area/Locality East Delhi East Delhi *East Delhi *Teast Delhi	(c) Number of members (d) number of members excluding proposed employee(s) 4 Address of the Company 4A *Correspondance Address *Line 1 Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality East Delhi East Delhi East Delhi East Delhi	
(d) number of members excluding proposed employee(s) 4 Address of the Company 4A *Correspondance Address *Line 1 Coffice NO 205 LOTUS TOWER F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City *Area/Locality East Delhi East Delhi East Delhi East Delhi	(d) number of members excluding proposed employee(s) 4 Address of the Company 4A *Correspondance Address *Line 1 Line 2 F-06 VIJAY BLOCK *Pin code Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality Line 2 F-06 VIJAY BLOCK East Delhi	
4 Address of the Company 4A *Correspondance Address *Line 1 OFFICE NO 205 LOTUS TOWER F-06 VIJAY BLOCK *Pin code 110092 Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City Fast Delhi *Area/Locality East Delhi East Delhi	4 Address of the Company 4A *Correspondance Address *Line 1 Line 2 F-06 VIJAY BLOCK *Pin code Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District *City *Area/Locality *Area/Locality *East Delhi East Delhi East Delhi East Delhi East Delhi	
*Line 1 OFFICE NO 205 LOTUS TOWER Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details : Mobile No. 7838888080 Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City East Delhi *Area/Locality East Delhi	*Line 1 Line 2 *Pin code Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City Area/Locality OFFICE NO 205 LO F-06 VIJAY BLOCK 110092 7838888080 Delhi East Delhi East Delhi East Delhi East Delhi	
*Line 1 Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details: Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District *City East Delhi *Area/Locality	*Line 1 Line 2 F-06 VIJAY BLOCK *Pin code 110092 Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality Delhi East Delhi East Delhi East Delhi East Delhi	
Line 2 *Pin code 110092 Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT Delhi *District East Delhi *City *Area/Locality	East Delhi *Area/Locality F-06 VIJAY BLOCK Fast Delhi Fast Delhi East Delhi East Delhi	
*Pin code Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality Toologe 110092 7838888080 Delhi East Delhi East Delhi East Delhi East Delhi East Delhi	*Pin code 110092 Contact Details : Mobile No. 7838888080 Contact Details: Phone No. (with STD code) *State/UT *District *City East Delhi *Area/Locality East Delhi East Delhi East Delhi	TUS TOWER
Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality 7838888080 Delhi East Delhi East Delhi East Delhi East Delhi	Contact Details : Mobile No. Contact Details: Phone No. (with STD code) *State/UT *District *City *Area/Locality 783888080 Delhi East Delhi East Delhi East Delhi East Delhi	
Contact Details: Phone No. (with STD code) *State/UT *District *City East Delhi *Area/Locality East Delhi East Delhi	Contact Details: Phone No. (with STD code) *State/UT *District *City East Delhi *Area/Locality East Delhi East Delhi	
*State/UT *District *City *Area/Locality Delhi East Delhi East Delhi East Delhi East Delhi	*State/UT *District *City East Delhi *Area/Locality East Delhi East Delhi	
*District East Delhi *City East Delhi *Area/Locality East Delhi	*District East Delhi *City East Delhi *Area/Locality East Delhi	
*City East Delhi *Area/Locality East Delhi	*City East Delhi *Area/Locality East Delhi	
*Area/Locality East Delhi	*Area/Locality East Delhi	
Fax	Fax	
email ID of the company Hemant@Bol7.com	email ID of the company Hemant@Bol7.com	n

4B *Whether the address for correspondence is the address office of the company	of registered • Yes
(In case Yes is selected, please provide Longitude and Latitude details)	
Longitude	77.27512
Latitude	28.63175
Attachments:	
 Proof of Office address along with NOC, if applicable (Conveyance/ Lease deed /Rent Agreement along with rent receipts); 	1NOC lendvision.pdf
2. Copy of the utility bills (not older than two months);	Hemant_Latest Bill.pdf
4C *Name of the office of the Registrar of Companies in which the proposed company is to be registered	ar of Companies, National 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)	1	1
(b) Number of non -individual first subscriber(s)		0
(c) Number of individual first subscriber(s) cum director(s)	1	1
(d) Total number of directors (director(s) who Is/are not subscriber(s) + subscriber(s) cumdirector(s) as mentioned in above Row no. 3)	1	1

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 *Category Company/Foreign company/ Company incorporated outside India Body Corporate/Others) *Corporate identity number (CIN) or foreign company registration number (FRCN) or any othr registration number *Name of the body corporate Registered office address or Principal place of business in India or Principal place of business outside India *Line 1 Line 2 *Country *Pin code Area/Locality *City District *State/UT *Phone (with STD/ISD code) Fax *email ID of the company 6A(ii) Particular of the person authorized by the Director Identification number (DIN) *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	
Income tax-PAN	
*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	
Present Address	
*Line 1	
Line 2	
*Country	
*Pin code	
*Area/Locality	
*City	
District	
*State/UT	
*Phone (with STD/ISD code)	
Fax	
email ID of the company	
*Identity Proof	
*Identity Proof No.	
*Residential Proof	

(Voter Identity Card/Passport/Driving License/Aad	naar)
*Residential Proof No.	
Submit the proof of identity and pro	of of
address	
(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 shares	
Nominal amount per share (in INR)	
Nominal amount per share (in INR) Total amount (in INR)	
Nominal amount per share (in INR)	al
Nominal amount per share (in INR) Total amount (in INR) Description of preference share capi	al Subscribed capital
Nominal amount per share (in INR) Total amount (in INR) Description of preference share capi *Number of classes Class of shares	
Nominal amount per share (in INR) Total amount (in INR) Description of preference share capi *Number of classes Class of shares Number of preference shares	
Nominal amount per share (in INR) Total amount (in INR) Description of preference share capi *Number of classes Class of shares Number of preference shares Number of preference shares Nominal amount per share (in INR)	
Nominal amount per share (in INR) Total amount (in INR) Description of preference share capi *Number of classes Class of shares Number of preference shares	

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 subscri DIN)	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)	

7A Particulars of Subscriber(s) cur	n Directors (having valid DIN	1)	
7A(i) Basic detail of Subscriber(s)	cum Directors		
Director Identification Number (DIN)		03175130	
*Name		HEMANT GUPTA	
*Designation		Director	
Director/Managing Director/Whole time director/N	ominee director)	,	
*Category Promoter/Professional/Independent/Nominee)		Promoter	
Whether			
Chairman Chairman			
Executive Director			
Non-executive Director			
*Name of the company or institution w	nose nominee the apointee is		
*email ID		hemant@bol7.com	
Description of Share capital			
Total subscribed share capital (in INR)		50000	
Description of equity share capita	I		
*Number of classes		1	
Class of shares		Colorathadaaatta	
EQUITY		Subscribed capital	
lumber of equity shares		5000	
Nominal amount per share (in INR)		10	
Total amount (in INR)		50000	
Description of preference share ca	pital		
*Number of classes			
		L	

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	h Subscribers cum directo	ors have interest
Number of entitie	es in which director has ir	nterest	4
*CIN/LLPIN/FCRN	/Registration Number		AAR-9369
*Name			NGANDASSOCIATES LLP
*Address	OFFICE NO 205 SECOND FLOOR NAGAR, ,NA110092,New Delhi,E		OOR ,LOTUS TOWER F 6 VIJAY BLOCK, LAXMI Ihi,Delhi
*Nature Of *Designation Director Other(specify)		Other(specify)	
interest	Percentage of Shareho	olding 0	Amount (in INR)
*CIN/LLPIN/FCRN	/Registration Number		U01409DL2020OPC365589
*Name			BOL7 AGRO FOODS (OPC) PRIVATE LIMITED
*Address		F-06 OFFICE NO-205,SECON NAGAR, ,NA110092,New De	D FLOOR VIJAY BLOCK LOTUS TOWER LAXMI Ihi,Delhi
*Nature Of	*Designation Direct	ctor	Other(specify)
interest	Percentage of Shareho	olding 0	Amount (in INR)
*CIN/LLPIN/FCRN	/Registration Number		U72300DL2010PTC208903
*Name			BOL7 TECHNOLOGIES PRIVATE LIMITED

Nature Or	*Designation	Director	Other(specify)
interest	Percentage of S	hareholding 0	Amount (in INR)
*CIN/LLPIN/FCRN/Re	egistration Num	ber	U73100DL2023PTC414907
*Name			HIT DIGITAL SOLUTIONS PRIVATE LIMITED
*Address		OFFICE NO 205 LOTUS TO	WER, F-06 VIJAY BLOCK,East Delhi110092,East Delhi,Delhi
Natare or	*Designation	Managing Director	Other(specify)
interest	Percentage of S	hareholding 0	Amount (in INR)

7B Particulars of Subscriber(s) cum Directors (Not having valid 7B(i) Basic detail of Subscriber(s) cum Directors *First Name ANJALI Middle Name *Surname BHAT *Father's First Name PYARAY Father's Middle Name LAL *Father's Surname *Gender Female *Date of Birth (DD/MM/YYYY) 04/03/1975 India *Nationality JAMMU *Place of Birth (District & State) Whether citizen of India Yes \bigcirc No Whether resident in India Yes \bigcirc No *Occupation type Business (Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others) *Area of Occupation Business If 'Others' selected, please specify *Educational Qualification Bachelor's degree If 'Others' selected, please specify Primary education/Secondary education/Vocational qualification Bachelor's degree/Master's degree/Doctorate or higher/Professional Diploma/Others) PAN BVIPB6983R *Designation Director (Director/Managing Director/Whole time director/Nominee director) Promoter *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	07889938491
*email ID Permanent	anjalibhat500@gmail.com
*Line 1	Flat No. 27 Block L, TRT Buta Nagar Camp,
Line 2	Opp. Green Land Palace, PO Paloura Jammu City
*Country	India
*Pin code	181121
*Area/Locality	Paloura
*City	Jammu
District	Jammu
*State/UT	Jammu & Kashmir
Phone (with STD/ISD code)	
*Whether present residential address same as permanent residential address *Present	• Yes No
*Line 1	Flat No. 27 Block L, TRT Buta Nagar Camp,
Line 2	Opp. Green Land Palace, PO Paloura Jammu City
*Country	India
*Pin code	181121
*Area/Locality	Paloura
*City	Jammu
District	Jammu
State/UT	Jammu & Kashmir
Phone (with STD/ISD code)	

Duration of stay at present address (Years/	Month)	12/7
(Years -> 0 to 99 Month -> 0 to 11)		,
*If Duration of stay at present addressis les residence	s than a one year then address	of previous
*Identity Proof		Aadhar Card
(Voter Identity Card/Passport/Driving License/Aac	dhaar)	
*Residential Proof		Bank Statement
(Voter Identity Card/Passport/Driving License/Aac	dhaar)	
*Identity Proof No.		923567744738
Residential Proof No.		JAKAOROOPNA
*Submit the proof of identity and proaddress	oof of	
(a) *Proof of identity		BVIPB6983R_ANJALI BHAT AADHAR.pdf
(b) *Residential Proof		BVIPB6983R_Anjali Bank Statement.pdf
Description of Share capital		'
Total subscribed share capital (in INR)		50000
Description of equity share capital		
*Number of classes		1
Class of shares		Subscribed capital
EQUITY		
Number of equity shares		5000
Nominal amount per share (in INR)		10
Total amount (in INR)	50000	
Description of preference share capi	tal	
*Number of classes		
Class of shares		Subscribed capital
		.
Number of preference shares		
Nominal amount per share (in INR)		
Total amount (in INR)		

*Number of entities in which director has interest *CIN/LLPIN/FCRN/Registration Number *Name *Address		0	
		*Nature Of	*Designation
terest	Percentage of Shareholding	Amount (in INR)	

7C Particulars	of Directors (having valid DIN)	
7C(i) Basic De	tails of Directors	
*Director Identification Number (DIN)		
*Name		
*Designation (Director/Managing Director/Whole time director/Nominee director)		
*Category (Promoter/Profession	nal/Independent/Nominee)	
Whether Chairman Executive D Non-execut		
Name of the company or institution whose nominee the apointee is *email ID		
	tion of entities in which Subscribers cum directors have in	nterest
*CIN/LLPIN/FCF	RN/Registration Number	
*Address		
*Nature Of interest	*Designation Percentage of Shareholding 0	Other(specify) 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	
*Occupation type	
(D. 10 - 1 / D. 10	
(Business/Professional/Goverment/Employment/Private Employment/Housewife /Student/Others)	
*Area of Occupation	
/Student/Others)	
*Area of Occupation	
*Area of Occupation If 'Others' selected, please specify	
*Area of Occupation If 'Others' selected, please specify *Educational Qualification	
*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	
*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)	
*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 (Director/Managing Director/Whole time director/Nominee director)	
*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	

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		
	tay at present addressis less than a one year then vious residence	
*Identity Proof		
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	1
*Residential Pr	oof	
(Voter Identity Ca	rd/Passport/Driving License/Aadhaar)	'
*Identity Proof	f No.	
Residential Pro	oof No.	
*Submit the paddress	proof of identity and proof of	
(a) *Proof of ide	entity	
(b) *Residentia	I 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		
*Address		
*Nature Of interest	*Designation	Other(specify)
	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	
madic Hamo	
*Surname	
*Father's First Name	
Tuthor Strist Number	
Father's Middle Name	
*Father's Surname	
Tather 3 Junianie	
*Gender	
*Date of Birth (DD/MM/YYYY)	
Date of bill th (bb/fwilvi/1111)	
*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)	

7	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	MAX 2MB	MAX 2MB			
C	Declaration by Nominee					
I do solemnly declare that I am an Indian citizen and resident in India and I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law or LLP Act in the last five years. I further declare that						
	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 Delhi						
9B *Whether stamp duty is to be paid electronically through MCA 21 system						
		Not applicable				
9	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.)	10	200	1500		

Type of document/ Particulars	Form	Memorandum of association	Articles of association	Others
otal amount of stamp uty paid (in Rs.)				
lode of payment of stamp uty				
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 dispense stamp ouchers on behalf of the overnment				
erial number of mbossingor stampsor amppaper or treasury nallannumber				
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ambossingor stampsor amppaper or treasury nallannumber egistration number of endor ate of purchase of stamps stamp paper or ayment of stamp duty D/MM/YYYY) ace of purchase of amps or stamp paper or	for applying Permane	ent Account Number (PAN) and Tax Deduc	tion Account Nur
N)	AO ty	vpe Ra	nge Code	AO No.
N) ormation specific to PAN		/pe Ra	nge Code	AO No .
N) Primation specific to PAN Area Code DEL	AO ty	vpe Ra		
	AO ty			
N) Primation specific to PAN Area Code DEL Information specific to	AO ty C		66	1

*Business/Profession code	20				
Attachments					
(a) Memorandum of association	MAX 2MB				
(b) Articles of association	MAX 2MB				
(c) Declaration by first subscriber(s) and director(s);(Affidavit is not required to be attached);	MAX 2MB				
(d) Copy of certificate of incorporation of the foreign body corporate and resolution passed by foreign company or authority given through constitutional document;	MAX 2MB				
(e) Resolution passed by promoter company;	MAX 2MB				
(f) Interest of first director(s) in other entities	MAX 2MB				
(g) Optional attachment(s) (if any)	LENDVISION DOCUMENTS FINAL.pdf				
Declaration I have gone through the provisions of the Companies Act, 2013, the rules thereunder and prescribed guidelines framed thereunder in respect of reservation of name, understood the meaning thereof 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 constitute 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.					
I * HEMANT GUPTA					
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;					

acknowledging all communications and regiven address at item 4 (a)of this form;	•	,			3
*I, on behalf of all the first director(s) declaration given herein as stated above application form for incorporation and at suppressed. All the required attachments original records maintained by the promo	are true to the be tachments theret have been comp	st of my knowledge and b o are correct and complet letely, correctly and legibl	elief, the informat e, and nothing rel y attached to this	ion given in the evant to this form and are a	nis integrated orm has been as per the
I, on behalf of the proposed Directors whose particulars for allotment of DIN are filled as above, hereby confirm and declare that they are not restrained, disqualified, removed for being appointed as Director of a company under the provisions of the Companies Act, 2013 including sections 164 and 169, and have not been declared as proclaimed offender by any Economic Offence Court or Judicial Magistrate Court or High Court or any other Court, and not been already allotted a Director Identification Number (DIN) under section 154 of the Companies Act, 2013, and I further declare that I have read and understood the provisions of Sections 154, 155, 447 and 448 read with Sections 449, 450 and 451 of the Companies Act, 2013.					
I, on behalf of the proposed directors, a land border with India, necessary securithe consent.	ty clearance from	Ministry of Home Affairs,	Government of Ind	dia shall be att	ached with
The MoA and AoA attached to the for		, and the second			
☐ I hereby declare as per Rule 5(iv) of Co Part of the Act has filed all documents wh	•	0 ,		, ,	rsion in this
NEHA GUPTA	a	Company Secretary		having Mem	nbership numbe
42443	and/or certifica	ite of practice number	15745		
has been engaged to give declaration u	nder section 7(1)	(b) and such declaration	is provided belov	N.	
*To be digitally signed by director					
*DIN/PAN			03175130		
11 Declaration and Certification by Pr	ofessional				
NEHA GUPTA					member of
The Institute of Company Secretary of In	dia			having	office at*
OFFICE NO.205/206, 3RD FLOOR, LOTUS	TOWER, F-06, VIJ	Who is engage	ed in the formation	n of the compa	any
BECASE HAXMANAGE BREATH ENGAGED for the purpose of certification of this form. It is hereby also certified that I have gone					
through the provisions of the Companies incidental thereto and I have verified the		-			
maintained by the applicant which is sub	ject matter of this	form and found them to			
information material to this form has bee	n suppressed. I fu	irther certify that;			
i The draft memorandum and articles of and 5 and rules made thereunder; an		ve been drawn up in confo	rmity with the pro	visions of sect	ions 4
ii All the requirements of Companies A under section 7 of the Act and matter				n of the comp	any
iii The said records have been properly relevant provisions of the Companies			the Company and	d maintained a	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;		
 V 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). Vi It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any found at any stage. Vii 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			
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:			
AssociateFellow			
Membership number	42443		
Certificate of practice number	15745		
of timoute of practice framiber	10710		
Income-tax PAN			
For office use only:			
eForm Service request number (SRN)			
5 (1) (77 (1) (1) (1)			
eForm filing date (DD/MM/YYYY)	07/07/2023		
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