



CAYMAN ISLANDS
STOCK EXCHANGE

**NAME CHANGE
REQUEST CHECKLIST**

*Current Name:	
*New Name:	
Existing CUSIP or ISIN number (If known):	
*Country of Incorporation	<input type="checkbox"/> Cayman Islands <input type="checkbox"/> British Virgin Islands
*Billing Address: (party responsible for paying invoice)	
*Effective Date of Change: (As stated on the Name Change Certificate)	
*Name Change Certificate Provided	<input checked="" type="checkbox"/> Yes
Other Document Supporting Documents Provided: (if applicable)	

***: Required Fields – request will not be accepted unless these fields are completed.**