

FULL DEMATERIALIZATION FORM FOR MIGRATION

To: The Registrar Name of Company:			_	Afix			
Instruction: Please fill out the form in CAPITAL LETTERS							
Section 'B' is applicable only if certificate(s) is/are misplaced, lost or destroyed. Please credit my account at Central Securities Clearing System (CSCS) with shares from my holdings in the company stated below . I recognize this will invalidate any certificate(s) in my possession, or which might come into my possession in respect of my total holding(s) in this/this company.							
SECTION A							
Shareholder's Full Name				$\langle \rangle$			
Address				Thumb print			
Mobile No Registrar's Id No (RIN							
CSCS Investor's Acct Number Clearing House Number(CHN)							
Bank Name Bank Account Name							
BVN Bank Account Number							
Email Address							
Name Of Stockbroking firm of chioce		Stockbroker's Code((Optional)				
Authorized signature and seal Stockbrokers' signature 2nd Signature (applicable)			
CERTIFICATE DETAILS							
S/N CERTIFICATE NO. (IF ANY) UNITS	S/N	CERTIFICATE NO. (IF ANY)	UNITS				

SECTION B: INDEMNITY FOR MISPLACED, LOST OR DESTROYED CERTIFICATE(S)

I hereby request the Registrar to credit my account at Central Securities Clearing System (CSCS) with unit of shares not covered in my share certificate(s) detailsquoted in Section 'A' above. The holdings are registered in my name, and the original shares/s tocks certificate(s) has/have been misplaced, lost or destroyed or was never received.

I hereby, with the Guarantor whose name hereunder appears, indemnify the said Company and the Registrars against all claims and demands, money, losses, damages, costs and expenses which may be brought against, or be paid, incurred or sustained by the said Company and /or the Registrars by reason or in consequence of the said certificate(s) having been misplaced, destroyed, lost or in consequence of a transfer being registered without surrender of the certificate(s) or otherwise whatsoever. I further undertake and agree that if the said Certificate(s) shall hereafter be found, to forthwith deliver up to the Registrars or their successors or assigns without cost, fee or reward

S/N	CERTIFICATE NO. (IF ANY)	UNIT	Dated this Day of 20	
			Name:	
			Signature:	Company
			Joint (ii) (if applicable):	Seal
In the	Presence of:	I	Joint (iii) (if applicable):	
Name	:		Phone No:	

Address: ____

This is to be executed by the shareholder's banker or insurance company.

On behalf of ______, we hereby agree jointly and severally to keep the company and /or the Registrar or other persons acting on their behalf fully indemnified against all actions, proceedings, Liabilities, claims, losses, damages, costs and expenses in relation to or arising out of your accepting to re- issue to the rightful owner the shares/stocks, and to pay you on demand, all payments, losses, costs and expenses suffered or incurred by you in consequence thereof or arising therefrom.

Authorised Signatory (1):_

Authorised Signatory (2):___

CORPORATE

DOCUMENTATION REQUIRED : INDIVIDUAL

 CSCS Statement 2. Share certificate or CSCS global search statement.
Valid Federal Republic of Nigeria means of identity card with signature NB: All documents to be duly stamped and signed by authorised signatories

Board resolution with company seal Authorized Signatories

Insurance coy seal or bank