## Form No. DIR-12

## Particulars of appointment of directors and the key managerial personnel and the changes among them

[Pursuant to sections 7(1) (c), 168 & 170 (2) of The Companies Act, 2013 and rule 17 of the Companies (Incorporation) Rules 2014 and 8, 15 & 18 of the Companies (Appointment and Qualification of Directors) Rules, 2014]



Refer instruction kit for filing the form All fields marked in \* are mandatory

| Company details   |                              |   |
|---|------------------------------|---|
| 1 (a) *Corporate IdentityNumber (CIN) of company  |                              | U35990MP2016PTC041166   |
| (b) *Name of the company  |                              | BOTLAB DYNAMICS PRIVATE LIMITED   |
| (c) *Address of the registered office of the compar                                       | y                            | Building No. 1/6,<br>M.I.G.Nanakheda<br>Extension, Yojana<br>No-2,, Ujjain, Indore,<br>Madhya Pradesh,<br>456010, India |
| (d) *E-mail ID of the company   |                              | albunkar@gmail.com  |
| Particulars of Director/KMP   |                              |   |
| 2 *Number of Managing director or director(s) for wh                                      | nich the form is being filed | 2   |
| B Details of the Managing Director or Director of the (a) Purpose of filing the form      | company                      |   |
| <ul><li>○Appointment</li></ul>  | Cessation                    | Change in designation   |
| <ul> <li>Appointment due to disqualification of<br/>all the existing directors</li> </ul> | Appointment by liquidator    |   |
| (b) Director Identification Number (DIN)  |                              | 08197486  |
| (c) Name  |                              | ANUJ KUMAR BARNWAL  |
| (d) Father's name   |                              | VIJAY KUMAR BARNWAL   |

|       | S. No.                  | CIN/ LLPIN/ FCRN/<br>Registration number                     | Name               | Address              | Designation            | Percentage of Shareholding | Amount                                      | Others<br>(specify) |
|-------|-------------------------|--|--------------------|----------------------|------------------------|----------------------------|---|---------------------|
| (r) N | lumber o                | f such entities  |                    |                      |                        | 1                          |   |                     |
| itere | est in oth              | er entities  |                    |                      |                        |                            |   |                     |
| ١     | with the                | company with effect fro                                      | m                  |                      | (DD/MM/Y               | YYY) due to                |   |                     |
| (q)   | In case of              | cessation, hereby confi                                      | irmed that th      | e above-             | $\bigcirc$ i           | Director ( ) Ma            | naging Directo                              | r is not assoiated  |
| -     | Name of<br>the appo     | the company or institut<br>intee is                          | ion whose au       | ithorized repres     | entative or nomir      | nee                        |   |                     |
| (o)   | Name of                 | the director to whom su                                      | uch appointe       | e is alternate       |                        |                            |   |                     |
| (n)   | DIN of su               | ch director to whom ap                                       | pointee is alt     | ernate               |                        |                            |   |                     |
|       |                         |  |                    |                      |                        | <u>.</u>                   | lon-Executive [                             | Director            |
|       |                         |  |                    |                      |                        | E                          | xecutive Direct                             | or                  |
| (m)   | Whethe                  | Chairman, Executive D  | irector, Non-I     | Executive Direct     | or                     |                            | hairman                                     |                     |
|       | Category<br>Promoter/Pr | ofessional/Independent/Small                                 | shareholder's dire | ector)               |                        | Pi                         | rofessional                                 |                     |
| (k) I | Date of A               | ppointment or change   | in designatio      | n (DD/MM/YYY         | Y)                     | 20                         | 0/01/2023                                   |                     |
|       |                         | naging director/Alternate direc<br>ctor/Whole-time director) | tor/Additional di  | rector/Director appo | inted in casual vacanc | y/ D-                      | rrector                                     |                     |
|       | Designati               |  |                    |                      |                        | m                          | irector                                     | .yılamıcs.co        |
| (i) F | -mail ID                | of director  |                    |                      |                        |                            | nuj@botlabd                                 | Imami ag ag         |
| (h)   | Gender                  |  |                    |                      |                        |                            | ale   |                     |
| (g)   | Date of b               | irth (DD/MM/YYYY)  |                    |                      |                        | 10                         | 0/09/1992                                   |                     |
| (f) N | Nationalit              | у  |                    |                      |                        | Ir                         | ndia  |                     |
| (e) i | Present r               | esidential address   |                    |                      |                        | Н                          | A-14, VINDH<br>DSTEL IIT<br>AUZ KHAS        | YACHAL<br>DELHI,    |
| (0)   | Drocont r               | acidontial addrace   |                    |                      |                        | T17                        | \ 1.4 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | TA CITA T           |

| S. No. | CIN/ LLPIN/ FCRN/<br>Registration number | Name                           | Address   | Designation | Percentage of<br>Shareholding | Amount | Others<br>(specify) |
|--------|--|--------------------------------|---|-------------|-------------------------------|--------|---------------------|
|        | U73100DL2018PT<br>C338111                | AEROGRAM<br>PRIVATE<br>LIMITED | 23,<br>KAMAKSHI<br>APARTMENT<br>DWARKA,<br>SECTOR-6<br>NEW DELHI<br>Delhi | Director    |                               |        |                     |

| (a) Purpose of filing the form   |   |  |
|--|---|--|
| ○ Appointment  | <ul><li>○Cessation</li></ul>                          | Change in designation                      |
| <ul> <li>Appointment due to disqualification<br/>all the existing directors</li> </ul>                           | of Appointment by liquidato                           | r  |
| (b) Director Identification Number (DIN)   |   | 07538985                                   |
| (c) Name   |   | ABHINAY BUNKAR                             |
| (d) Father's name  |   | BHAGWAN LAL BUNKAR                         |
| (e) Present residential address  |   | 1 WARD 32 POLICE<br>LINE                   |
| (f) Nationality  |   | India                                      |
| (g) Date of birth (DD/MM/YYYY)   |   | 05/12/1992                                 |
| h) Gender  |   | Male                                       |
| i) E-mail ID of director   |   | albunkar@gmail.com                         |
| (j) Designation<br>(Director/Managing director/Alternate director/Addit<br>Nominee director/Whole-time director) | tional director/Director appointed in casual vacancy/ | Director                                   |
| (k) Date of Appointment or change in design  | gnation (DD/MM/YYYY)                                  |  |
| [ ) Category<br>(Promoter/Professional/Independent/Small sharehol  | lder's director)                                      |  |
| m) Whether Chairman, Executive Director,   | , Non-Executive Director                              | Chairman                                   |
|  |   | Executive Director                         |
|  |   | Non-Executive Director                     |
| n) DIN of such director to whom appointe   | e is alternate  |  |
| o) Name of the director to whom such app   | pointee is alternate                                  |  |
| p) Name of the company or institution wh<br>the appointee is   | nose authorized representative or nomine              | ee   |
| q) In case of cessation, hereby confirmed t  | that the above-                                       | irector Managing Director is not assoiated |
| with the company with effect from 20,  | /01/2023 (DD/MM/YY)                                   | YY) dueto Resignation u/s 168              |

| mter  | est in oth       | er entities                                    |                   |                    |                    |                               |            |                     |
|-------|------------------|--|-------------------|--------------------|--------------------|-------------------------------|------------|---------------------|
| (r) N | Number o         | of such entities                               |                   |                    |                    |                               |            |                     |
|       | S. No.           | CIN/ LLPIN/ FCRN/<br>Registration number       | Name              | Address            | Designation        | Percentage of<br>Shareholding | Amount     | Others<br>(specify) |
|       |                  |  |                   |                    |                    |                               |            |                     |
|       |                  | manager(s), secretary(s),<br>rm is being filed | Chief financia    | al Officer or Chie | f Executive Office | er for (                      | )          |                     |
| 5 Det | ails of ma       | nager(s), secretary(s), Cl                     | nief financial C  | Officer or Chief E | xecutive Officer   | of the company                |            |                     |
| (a)   | Purpose          | of filing the form                             |                   |                    |                    |                               | ○ Appointm | ent                 |
|       |                  |  |                   |                    |                    |                               | Cessation  |                     |
| (b)   | Director         | Identification Number (I                       | OIN), if any      |                    |                    |                               |            |                     |
| (c)   | Income T         | ax permanent account I                         | number (PAN)      |                    |                    |                               |            |                     |
| (d)   | Members          | ship number of the com                         | pany secretar     | у                  |                    |                               |            |                     |
| (e)   | (i) First N      | ame (Either of applicant's F                   | irst name or Sur  | name shall be mar  | ndatory to enter)  |                               |            |                     |
|       | (ii) Middle Name |  |                   |                    |                    |                               |            |                     |
| (     | iii) Last N      | ame (Either of applicant's F                   | irst name or Sur  | name shall be mar  | ndatory to enter)  |                               |            |                     |
| (f) l | -ather's n       | aame   |                   |                    |                    |                               |            |                     |
| (     | i) First Na      | me (Either of applicant's fa                   | ther's first name | or Surname shall b | pe mandatory to en | ter)                          |            |                     |
| (     | ii) Middle       | Name   |                   |                    |                    |                               |            |                     |
| (     | iii) Last N      | ame (Either of applicant's f                   | ather's first nam | e or Surname shall | be mandatory to e  | nter)                         |            |                     |
| (g)   | Present r        | esidential address                             |                   |                    |                    |                               |            |                     |
| Å     | Address L        | ine  |                   |                    |                    |                               |            |                     |
| ŀ     | Address L        | ine  |                   |                    |                    |                               |            |                     |
| (     | Country          |  |                   |                    |                    |                               |            |                     |
| F     | Pin Code/        | Zip Code                                       |                   |                    |                    |                               |            |                     |
|       | Area/Loca        | slity  |                   |                    |                    |                               |            |                     |

| City  |                                |
|---|--------------------------------|
| District  |                                |
|   |                                |
| State/UT  |                                |
| (1) 5 (1:11 /55 /444/0000)  |                                |
| (h) Date of birth (DD/MM/YYYY)  |                                |
| (i) Designation (Manager/Company Secretary/CEO/CFO)   |                                |
| (j) Date of appointment or cessation (DD/MM/YYYY)   |                                |
| (k) Mobile Number (with Country code)   |                                |
| (I) E-mail ID   |                                |
| 6 SRN of form INC-28  |                                |
|   |                                |
| Attachments   |                                |
| 7 (a) Ouday frame count/NCLT  |                                |
| 7 (a) Order from court/NCLT   |                                |
| (b) Notice of resignation   | RESIGNATION-                   |
|   | LETTER_Abhinay.pdf             |
| (c) Evidence of cessation   | RESIGNATION-                   |
| (5, 21.55.155 C. 03532101.  | LETTER_Abhinay.pdf             |
|   | DID 2 Anui ndf                 |
| (d) Optional attachments – if any   | DIR-2_Anuj.pdf BR and OR.pdf   |
|   |                                |
| Director's Consent and Declaration  |                                |
|   | BOTLAB DYNAMICS                |
| ANUJ KUMAR BARNWAL hereby give my consent to act as a director of   | PRIVATE LIMITED                |
| (name of the company), pursuant to sub-section (5) of section 152 of the companies Act, 2013 a  | nd Certify that I am not       |
| disqualified to become a director under the companies Act, 2013.  |                                |
| I declare that I have not been convicted of any offense in connection with the promotion, for company or LLP and have not been found guilty of any fraud or misfeasance or of any bread this Act or any previous company law in the last five year. | =                              |
| I further declare that if appointed my total Directorship in all the companies shall not exceed companies in which a person can be appointed as a Director.   | d the prescribed number of     |
| I further declare that I have not incurred disqualification under the Companies Act, 2013 in a that I, at present, stand free from any disqualification from being a director.  | any of the above companies and |
|   |                                |
|   |                                |

| C. I am not required to obtain the security clearance from the Ministry of Home Affairs, Government of India under sub-rule (1) of rule 10 before applying for director identification number; or  C. I am required to obtain the security Clearance from the Ministry of Home Affairs, Government of India under sub-rule (1) of rule 10 before applying for director identification number and the same has been obtained and is attached.  I further declare that I have not incurred disqualification under the Companies Act, 2013 in any of the above companies and that I, at present, stand free from any disqualification from being a director.  I further declare that I have not incurred disqualification from being a director.  I further declare that I have not incurred disqualification from being a director.  I further declare that I have not incurred disqualification from being a director.  I further declare that I have the Director/Managing  I further declare that I have the Director/Managing  I further declare that I have the Director/Managing  I further declare that I have requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of its form and matters incidental hereton have been compiled with. I also declare that all the information given herein above is use, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director/Manager/Company Secretary/Chief executive officer/Chief Financial Officer/Statutory Auditor/Liquidatory  Director identification number of the director or DIN or PAN of the manager or CEO or Groot identification number of the director and the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental here to and in have verified the above particulars [including attachments] from the original/certified the above particulars [including attachments] from the original/certified records maintained by the relevant provisions of the Compani |   |   |  |   |
|---|---|---|--|---|
| l am required to obtain the security clearance from the Ministry of Home Affalis, Government of India under sub rule (1) of rule 10 before applying for director identification number and the same has been obtained and is attached,  I further declare that I have not incurred disqualification under the Companies Act, 2013 in any of the above companies and that I, at present, stand free from any disqualification from being a director.  I further declare that I have not incurred disqualification from being a director.  I further declare that I have not incurred disqualification from being a director.  I further declare that I have been breector/ Managing  I further declare that I have been completed by the Board of Directors of the Company/ by the court or NCLT  I and I and I are quirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been complied with. I also declare that all the information given herein above is use, correct, and complete including the attachments to this form and nothing material has been suppressed.  I to be digitally signed  I further declare that I have been complete financial Officer/Chief Financial Officer/Stutiony Auditor/Liquidatory  Director identification number of the director, or DIN or PAN of the manager or CEO or FO or liquidatory, or Membership number of the secretary or statutory auditor  Portificate by practicing professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through he provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental network and the properties of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental network and the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information later | l also declare that:  |   |  |   |
| If further declare that I have not incurred disqualification under the Companies Act, 2013 in any of the above companies and  If further declare that I have not incurred disqualification from being a director.  In that I, at present, stand free from any disqualification from being a director.  In that I, at present, stand free from any disqualification from being a director.  In that I is a being a director.  In that I is a being a director of the Company by the court or NCLT  In the court of the company by the court or NCLT  In that I is a being a director of the Company by the court or NCLT  In that I is a declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been complied with. I also declare that all the information given herein above is use, correct, and complete including the attachments to this form and nothing material has been suppressed.  In the digitally signed  In the digitally signed the director; or DIN or PAN of the manager or CEO or the director.  In the digitally signed that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone 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 ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information lateral to this form has been suppressed.  In the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  |   |   |  |   |
| eclaration  Sarita Ahlawat authorized by the Board of Directors of the Company/ by the court or NCLT  101 and 02 number dated 20/01/2023 (DD/MM/YYYY) to sign this form and eclare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of its form and matters incidental thereto have been complied with. I also declare that all the information given herein above is ue, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director, or Membership number of the director; or DIN or PAN of the manager or CEO or GO or Iquidiator; or Membership number of the secretary or statutory auditor  Por or liquidator; or Membership number of the secretary or statutory auditor  Portificate by practicing professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through he provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental hereto and I have verified the above particulars (including attachments) from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information atterial to this form has been suppressed.  For all the required attachments have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order   | rule (1) of rule 10   | •   |  |   |
| eclaration  Sarita Ahlawat  authorized by the Board of Directors of the Company/ by the court or NCLT  101 and 02  number dated 20/01/2023  (DD/MM/YYYY) to sign this form and eclare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been compiled with. I also declare that all the information given herein above is rue, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director identification number of the director; or DIN or PAN of the manager or CEO or Possional incidentification number of the director; or DIN or PAN of the manager or CEO or Possional incidentification of the secretary or statutory auditor  Pertificate by practicing professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental hereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the naterial to this form has been suppressed.  The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any   |   | -   |  | ct, 2013 in any of the above companies and  |
| authorized by the Board of Directors of the Company/ by the court or NCLT  101 and 02 number dated 20/01/2023 (DD/MM/YYYY) to sign this form and eclare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed    Director, Manager, Company Secretary, Chief executive officer, Chief Financial Officer, Statutory, Auditor, Liquidator.)    Director identification number of the director; or DIN or PAN of the manager or CEO or Iquidator; or Membership number of the secretary or statutory auditor    Possible of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental hereto and I have verified the above particulars [including attachment(s)] from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information hasterial to this form has been suppressed.    The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order    All the required attachments have been completely and legibly attached to this form;   It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  | o be digitally signed by the Dire   | ctor/ Managing  |  |   |
| number dated* 20/01/2023 (DD/MM/YYYY) to sign this form and eclare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been complied with. I also declare that all the information given herein above is rue, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director/Manager/Company Secretary/Chief executive officer/Chief Financial Officer/Statutory Auditor/Liquidator)  Director identification number of the director; or DIN or PAN of the manager or CEO or Ground or Statutory auditor  For or liquidator; or Membership number of the secretary or statutory auditor  Pertificate by practicing professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental nereto and I have verified the above particulars [including attachment(s)] from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information naterial to this form has been suppressed.  For the said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any   | <br>Declaration   |   |  | ·   |
| eclare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of his form and matters incidental thereto have been complied with. I also declare that all the information given herein above is rue, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Director/Manager/Company Secretary/Chief executive officer/Chief Financial Officer/Statutory Auditor/Liquidator)  Director identification number of the director; or DIN or PAN of the manager or CEO or 207676724  Director identification rumber of the secretary or statutory auditor  Director identification professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental nereto and I have verified the above particulars [including attachment(si)] from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information naterial to this form has been suppressed.  Further certify that:  The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  | * Sarita Ahlawat  | authorized by th  | ne Board of Directors of the Co                                  | ompany/ by the court or NCLT  |
| nis form and matters incidental thereto have been complied with. I also declare that all the information given herein above is use, correct, and complete including the attachments to this form and nothing material has been suppressed.  To be digitally signed  Designation  Director/Manager/Company Secretary/Chief executive officer/Chief Financial Officer/Statutory Auditor/Liquidator)  Director identification number of the director; or DIN or PAN of the manager or CEO or 107676724  To or liquidator; or Membership number of the secretary or statutory auditor  Designation  Director identification number of the director; or DIN or PAN of the manager or CEO or 107676724  Director identification professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental nereto and I have verified the above particulars [including attachment(s)] from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information naterial to this form has been suppressed.  For the said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  | 01 and 02   | number dated*   | 20/01/2023   | (DD/MM/YYYY) to sign this form and  |
| Director/Manager/Company Secretary/Chief executive officer/Chief Financial Officer/Statutory Auditor/Liquidator)  Director identification number of the director; or DIN or PAN of the manager or CEO or ITO or liquidator; or Membership number of the secretary or statutory auditor  Sertificate by practicing professional declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone 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 ompany/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.  Further certify that:  The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  |   |   |  |   |
| declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental hereto and I have verified the above particulars [including attachment(s)] from the original/certified records maintained by the ompany/applicant which is subject matter of this form and found them to be true, correct and complete and no information haterial to this form has been suppressed.  Further certify that:  The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  | Designation<br>Director/Manager/Company Secretary/Chief   | executive officer/Chief Fin   | ancial Officer/Statutory Auditor/Liquid                          | ator) Director  |
| declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental hereto and I have verified the above particulars [including attachment(s)] from the original/certified records maintained by the ompany/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.  Further certify that:  The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  |   |   | _  | 07676724  |
| The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any  | declare that I have been duly enga<br>he provisions of the Companies Ac<br>hereto and I have verified the abov<br>Company/applicant which is subjec<br>naterial to this form has been supp  | ged for the purposon,<br>t, 2013 and Rules the<br>re particulars [incluc<br>t matter of this forn | nereunder for the subject matt<br>ding attachment(s)] from the c | er of this form and matters incidental original/certified records maintained by the |
| relevant provisions of the Companies Act, 2013 and were found to be in order  All the required attachments have been completely and legibly attached to this form;  It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any   | further certify that:   |   |  |   |
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|   | It is understood that I shall be Ii  found at any stage   | iable for action und  | er Section 448 of The Compar                                     | iles Act, 2013 for wrong certification, if any                                      |
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| To be digitally signed by   | RESHU Digitally signed by RESHU SINGH 20 SINGH 2 |  |  |
|---|--|--|--|
| Category  |  |  |  |
| • Chartered Accountant (in whole time practice)   |  |  |  |
| Company Secretary (in whole time practice)  |  |  |  |
| Cost Accountant (in whole time practice)  |  |  |  |
| Whether associate or fellow:  |  |  |  |
|   |  |  |  |
| Membership number   | 525829   |  |  |
| Certificate of practice number  |  |  |  |
| For Office use only:  |  |  |  |
| eForm Service request number (SRN)  | AA3444169  |  |  |
| eForm filing date (DD/MM/YYYY)  | 12/07/2023   |  |  |
| Digital signature of the authorizing officer  |  |  |  |
| This eForm is hereby registered   |  |  |  |
| Date of signing (DD/MM/YYYY)  |  |  |  |
| OR  |  |  |  |
| This eForm has been taken on file maintained by the Registrar of Companies through electron statement of correctness given by the company | nic mode and on the basis of   |  |  |
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