

**SPECIMEN OF BOARD RESOLUTION***(To be provided on Pre-printed letter head of the company)*

**CERTIFIED TRUE COPY OF RESOLUTION PASSED IN THE MEETING OF THE BOARD OF DIRECTORS OF M/S..... HAVING ITS REGISTERED OFFICE AT..... HELD ON .....TH DAY OF ....., 20.....**

**“RESOLVED THAT** the Company is empowered to deal on Capital Market, Futures & Options, Currency Derivatives, Commodity Futures and/or Commodity Options Segment of National Stock Exchange of India Ltd. (NSE) / BSE Ltd. (BSE) / Multi Commodity Exchange of India Ltd. (MCX) / National Commodity & Derivatives Exchange Ltd. (NCDEX) and/or any other Segment that may be introduced by NSE/BSE/MCX/NCDEX.

**RESOLVED FURTHER THAT** a Corporate Beneficiary Account for depository purposes as well as Trading Account/s for the purpose of trading on NSE/BSE/MCX/NCDEX be opened with M/s. Share India Securities Limited having their Regd. Office at 615 and 616, 6th Floor, X-Change Plaza, Dalal Street Commercial Co-operative Society Limited, Road 5 E, Block 53, Zone 5, Gift City, Gandhinagar, Gujarat-382355, India. M/s. Share India Securities Limited be and is hereby authorized to honor instructions, oral or written, given on behalf of the company by any of the under noted authorized signatories:

Sl. No.	Name	Designation
1.	.....	.....
2.	.....	.....

who are authorized to sell, purchase, transfer, endorse, negotiate documents and/or otherwise deal through Share India Securities Limited on behalf of the Company.

**FURTHER RESOLVED THAT** Shri..... and/or Mr.....Directors and/or Mr....., Authorized Signatory of the Company, be and are hereby authorized to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds, as may be deemed necessary or expedient to open accounts and give effect to this resolution.

**RESOLVED FURTHER THAT** the Common Seal of the Company be affixed, wherever necessary in accordance with the relevant clauses of Articles of Association of the Company.”

**For** .....

**Chairman/Company Secretary**

**Specimen Signature of the Authorized Persons**

Sl. No.	Name	Specimen Signature
1.	.....	.....
2.	.....	.....