



PANAMA COMPANY

Order Sheet

NAME

Please list three names in order of preference (current name in case of Reactivation/Transfer-in):

a)

b)

c)

COMPANY'S ACTIVITIES

- Bankable Asset Holding Investment Holding Property Holding
- Consultancy services Trading
- Other:

Please provide a full description of the main activities of the company and list the countries where they should take place:

BANK ACCOUNTS

Shall the Company have a bank account(s): No Yes

Bank's name and location:

RELATED COMPANIES

Is there any other company related to this Company: No Yes

Company's name and jurisdiction:

SHARE CAPITAL

Registered shares only - M&A's stipulate that only registered shares are permitted.

- Standard: Authorized share capital USD 10'000.00 divided into 100 registered shares with a par value of USD 100.00 each (applies also to shelf companies)
- Authorized share capital: Currency Amount
divided into registered shares with a par value of each
- Number of shares without par value.

SHAREHOLDERS ^{1,2}

- Please provide a fiduciary shareholder
- Shareholder shall be as follows (name, address, number of shares to be allotted and number of share certificates):

- For corporate entities kindly enclose corporate documents (Certificate of Incorporation and Certificate of Good Standing, or equivalent)
- For natural persons, kindly provide passport copy and utility bill/address proof (certified by Notary Public, lawyer or regulated financial intermediary)



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DIRECTORS/OFFICERS ^{1,2}

Min. 3 directors required - Officers (President/ Treasurer/ Secretary) are required
The directors need to be registered with the Public Registry in Panama

- Three individual directors/officers located in Panama
- The directors of the company shall be as follows:

1) Name:
 Residential Address/
 Registered Address:
 Nationality(ies)/ Place of Incorporation:
 Place of Birth/Incorporation
 date and number
 Acting as (officer's position):

2) Name:
 Residential Address/
 Registered Address:
 Nationality(ies)/ Place of Incorporation:
 Place of Birth/Incorporation
 date and number
 Acting as (officer's position):

3) Name:
 Residential Address/
 Registered Address:
 Nationality(ies)/ Place of Incorporation:
 Place of Birth/Incorporation
 date and number
 Acting as (officer's position):

Signature right of directors: individual jointly by two
 other

- For corporate entities kindly enclose corporate documents (Certificate of Incorporation and Certificate of Good Standing, or equivalent)
- For natural persons, kindly provide passport copy and utility bill/address proof (certified by Public Notary, lawyer or regulated financial intermediary)

BENEFICIAL OWNER(S) ^{1,2}

1) Name:
 Residential Address:
 Occupation:
 Nationality/ies:
 Marital Status: % Ownership:

2) Name:
 Residential Address:
 Occupation:
 Nationality/ies:
 Marital Status: % Ownership:



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3) Name:

Residential Address:

Occupation:

Nationality/ies:

Marital Status: % Ownership:

Hereby I declare that the beneficial owner(s) is/are not a US Person, meaning not subject to US taxation. (Neither by way of e.g. citizenship, green card or satisfying any substantial residence test)

Hereby I declare that the beneficial owner(s) is/are a US Person (additional information required)

Alternatively, please have the enclosed Beneficial Owner Identification Sheet completed by the BO(s). Mandatory in case of PEP's.

In case of fully discretionary structures please provide as below and state which function. (Alternatively please complete the Declaration for Discretionary Structures):

- Name, date of birth, nationality, residential address of economic settlor/economic founder
- Name, date of birth, nationality, residential address of the trustee/board of foundation
- Name, date of birth, nationality, residential address of the protector
- Occupation of above persons
- Class of beneficiaries

- Please provide certified passport / ID copies and certified address proof of all beneficial owners (or of persons above) and corporate documents where applicable.

Please indicate (i) Source of Funds/Wealth of beneficial owner or economic settlor/economic founder and (ii) origin of the assets and incoming funds:

**DOCUMENTS
REQUESTED**

- Certificate of Public Registry
 Without legalization Authenticated by Apostille

SPECIAL REMARKS



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CONFIRMATION

I/We, the undersigned, hereby undertake to advise you immediately of any change in shareholders, directors and beneficial ownership and to provide you with such details as well as additional information and documents regarding beneficial ownership as you may require for the purposes of your or the Resident Agent's filing/due diligence compliance requirements.

I/We hereby authorize you to disclose any of the herein contained information to the relevant Group Compliance for due diligence purposes, and to the Resident Agent as and when required by applicable law and regulations and herewith waive protection under any applicable banking or professional secrecy rules and data protection laws as the case may be.

I / We hereby declare and confirm to pay when due the fees for the services requested from you in relation to the above mentioned company in accordance with your Fee Schedule in effect at the time.

When on page 1 we have chosen "Fiduciary shareholder" and/or on page 2 we have chosen "Three individual directors/officers located in Panama"; we herewith declare ourselves responsible for any act and for all activities of the Company and further to hold the Resident Agent, Fiduciary shareholders, Directors and Officers, and Leo Trust Switzerland as corporate service provider ("Leo Trust") or any of their partners, associates, directors, employees and group companies, as well as the persons authorized to act on their behalf, all collectively "Indemnified", free from any responsibility of liabilities and keep them fully indemnified in respect of any loss, damage, claim, proceeding, cost, including court costs and expenses to defend any legal action started by third parties, expense whatsoever or other liability suffered or incurred either directly or indirectly as a result of any claims whatsoever against the Indemnified, arising or resulting from any act or omission performed by the Resident Agent and/or the Directors in the capacity as directors/officers of the Company.

**PLEASE SIGN
HERE³**

Signature:
Name:
Company:
Date:

Signature:
Name:
Company:
Date:

¹ Leo Trust Switzerland AG **must be notified in writing of any changes latest within 14 days.**

² In case of a PEP additional information may be required

³ To be signed by the professional / institutional client of Leo Trust Switzerland AG who is/are the person/s authorised to pass instructions to Leo Trust Switzerland AG