

# SAMPLE INSTRUCTIONS ONLY

## ARTICLES OF INCORPORATION

BUSINESS CORPORATION ACT FORM 1

### Item 1. NAME OF CORPORATION

### Item 2. THE CLASSES AND ANY MAXIMUM NUMBER OF SHARES THAT THE CORPORATION IS AUTHORIZED TO ISSUE:

100	OR	1000	OR	Unlimited	.....	Class "A" Voting Shares	Voting
100	OR	1000	OR	Unlimited	.....	Class "B" Non-Voting Shares	
100	OR	1000	OR	Unlimited	.....	Class "C" Non-Voting Shares	
100	OR	1000	OR	Unlimited	.....	Class "D" Non-Voting Shares	

Dividends may be declared on any of the above classes of shares to the complete exclusion of the others.

### Item 3. RESTRICTIONS IF ANY ON SHARE TRANSFERS: *Some restrictions that are common are:*

- Only Class A shareholders have the right to vote.
- No shares of the capital of the corporations shall be transferred without the approval of a majority vote of the directors of the corporation.

If the right to transfer will NOT be restricted, please write "**NONE**" on the form.

### Item 4. NUMBER (OR MINIMUM AND MAXIMUM NUMBER) OF DIRECTORS:

One (1) minimum and Seven (7) maximum

### Item 5. OF THE CORPORATION IS RESTRICTED FROM CARRYING ON A CERTAIN BUSINESS, PLEASE SPECIFY THESE RESTRICTIONS:

- **NONE**

### Item 6. OTHER PROVISIONS IF ANY:

- The number of members of the corporation, exclusive of:
  - Persons who are in its employment and are shareholders of the corporation;  
and
  - Persons who, having been formerly in the employment of the corporation were, while in that employment, shareholders of the corporation after termination of that employment, is limited to fifty (50) persons, two (2) or more persons who are joint registered owners of one (1) or more shares, being counted as one (1) shareholder.
- Any invitation to the public to subscribe for the securities of the corporation is prohibited.
- The corporation has a lien on shares registered in the name of a shareholder for a debt to the corporation

If there are no provisions, please write "**NONE**" on the form.

### Item 7: Date the filling.

- name of person authorizing
- sign the form
- give his or her home address
- identification.

### Other Documents:

Please include the following with this form:

- **Notice of Address (Form 3)**
- **Notice of Directors (Form 6)**
- An Alberta Search Report, (**NUANS report**) dated not more than 90 days from the date the documents are received by the Registry.

Form 3 and Form 6 must be sent to a private Registrar within 15 days of any change of address of directors.

# ARTICLES OF INCORPORATION

Business Corporations Act

Section 6

Form 1

**1. Name of Corporation**

**2. The Classes of shares, and any maximum number of shares that the corporation is authorized to issue.**

**3. Restrictions on share transfers (if any):**

**4. Number, or minimum and maximum number, of directors that the corporation may have:**

**5. If the corporation is restricted FROM carrying on a certain type of business, or restricted TO carrying on a certain type of business, specify the restriction(s):**

**6. Other rules or provisions (if any):**

**7. Date signed by Incorporators:** \_\_\_\_\_  
Year      Month      Day

**Incorporators**

Signature: _____	Address: (including postal code)
Print Name:	
Signature: _____	Address: (including postal code)
Print Name:	
Signature: _____	Address: (including postal code)
Print Name:	
Signature: _____	Address: (including postal code)
Print Name:	

This information is being collected for the purposes of corporate registry records in accordance with the Business Corporations Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for Alberta Registries, Research and Program Support, Box 3140 Edmonton, Alberta T5J 2G7 (780) 427-7013.

**Notice of Address Or Notice Of  
Change of Address**

Business Corporations Act  
Section 19  
Form 3

1. **Name of Corporation**

2. **Corporate Access Number**

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3. **Address of Registered Office** (*P.O. Box number **can only** be used by a Society*)

Street	City/Town	Province	Postal Code
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OR

Legal Land Description	Section	Township	Range	Meridian
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4. **Records Address** (*P.O. Box number **cannot** be used*)

Street	City/Town	Province	Postal Code
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OR

Legal Land Description	Section	Township	Range	Meridian
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5. Address for Service by Mail (*If different from Item 3*)

*NOTE: If this is a change, please read instructions carefully.*

Post Office Box Only	City/Town	Province	Postal Code
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Authorized Signature                      Name of Person Authorizing (please print)                      Date

\_\_\_\_\_  
Telephone Number (Daytime)                      Identification                      Title (please print)

