

Office of the Registrar of Companies

Certificate of Incorporation pursuant to change of name

[Pursuant to rule 29 of the Companies (Incorporation) Rules, 2014]

Corporate Identification Number (CIN):



Registrar of Companies

Mailing Address as per record available in Registrar of Companies office:



EMPLOYEES' PROVIDENT FUND ORGANISATION

(A statutory Body under the Ministry of Labour and Employment, Government of India) www.epfindia.gov.in



PROVIDENT FUND CODE NUMBER INTIMATION LETTER

Validity of this letter is of three wage months from date of issue. Based on remittance, inspection and submission of all documents, certificate of coverage will be made available in ECR Login.

No: 2951728632KNBNG Date: 16-05-2015

To,

Mr. ASHOK D M
MANAGING DIRECTOR
AVI SOLAR ENERGY PRIVATE LIMITED
NO 146/4 SHANTHALA PLAZA 2ND FLOOR, 8TH MAIN 14 TH CROSS MALLESHWARAM
BANGALORE, BANGALORE
KARNATAKA - 560003

Sub: Allotment of Code Number to establishment M/s AVI SOLAR ENERGY PRIVATE LIMITED under Employees' Provident Fund and Miscellaneous Provisions Act, 1952-regarding.

Sir,

Based on the information submitted online by you, your establishment is registered with Employees' Provident Fund Organisation with the following code number:

Code Number: BGBNG1312614

This code number is allotted based on the following declarations by you:

- 1. Name of Establishment: AVI SOLAR ENERGY PRIVATE LIMITED
- 2. PAN of establishment: AAICA8132C
- 3. Date on which employment strength crossed 19: 06-04-2015
- 4. Section under which covered: 0001(3)(b)
- 5. Primary Activity: ELEC, MECH OR GEN ENGG PRODUCTS
- 6. Ownership Type: PRIVATE LIMITED COMPANIES
- 7. The address proof of the establishment is 1. copy of bank passbook/statement
- 2. any license/certificate/number issued by any Govt. authority
- 8. The proof of date of set up 07-09-2010 is Incorporation Certificate issued by the Registrar of the Companies.
- 9. As at the time of application, your establishment is having the following licenses and registrations:

S.No.	TYPE	NUMBER	DATE	ISSUED BY	ISSUED AT PLACE
а	Registrar of	U40108KA2010PTC0	07-09-2010	REGISTRER OF	KARNATAKA
	Companies	55090		COMPANIES	
b	Shops and	47/65/CE/0177/2012	06-12-2012	SENIOR LABOUR	BANGALORE
	Establishments Act			INSPETOR	

10. As on date of your application, your establishment is registered with ESIC with code number 49000329470000699.

Please take a print-out of this Intimation letter and Form 5A generated along with and submit a copy of the same together with the application form generated with the acknowledgement at the time of online submission, copies of all documents declared in the application form and attested specimen signature of the employer/authorized officer of your establishment, to the following Office of EPFO where all services related to your establishment shall ordinarily be attended to.

REGIONAL OFFICE

BANGALORE

Bhavishyanidhi Bhavan, No. 13, Raja Ram Mohan Roy Road, 560025

ro.bangalore@epfindia.gov.in

Please note that This intimation letter is generated with the Owners' Details in Form 5A and the intimated letter will be valid only if the Form 5A is enclosed.

Application Number : 2951728632 Code Number : BGBNG1312614

Important information:

- 1. By virtue of the sections 1(3)(a) and 1(3)(b) of the Act, it applies on an establishment on its own volition and you as an employer, are required to comply with the provisions of the Act accordingly. The obligations/duties/responsibilities cast upon you as an employer of this establishment and penalties, on account of non-compliance with the same, are explained on our website **www.epfindia.gov.in** and there is a link on ECR (Electronic Challan cum Return) portal also for the same. You are required to go through them carefully.
- A Starter's Kit for compliance under the Act is available for download from the ECR portal a link to which is provided from the epfindia.gov.in home page.
- 2. Remittance of dues under the provisions of the Act is to be made only through a Challan generated through the ECR (Electronic Challan cum Return) portal. (The process for registration on the portal, preparation of the ECR txt file and related information is available on the website and the portal).
- 3. In case this letter is produced as a proof of the code number of the establishment, before any person including any Inspector from EPFO, the Form 5A generated through the portal at the time of registration should be a part of this letter. The remittance details of the establishment will be available on the EPFO website through the link "Establishment Search" where from March 2012 wages onwards, all payments with the names of employees are available on the link in cases of remittances made after uploading the ECR.
- 4. Please quote the Code Number for all the future correspondence with EPFO.

This is a system generated letter and needs no signature.

Employees' Provident Fund Organisation

Encl: Form 5A Dated: 16-05-2015

Application Number: 2951728632 Code Number: BGBNG1312614



FORM No 5A

Date: 16-05-2015

EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A) EMPLOYEES' PENSION SCHEME 1995 (Please refer Para) EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para 10)

(Ist RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BASED ON ONLINE DECLARATION BY THE EMPLOYER WHILE APPLYING FOR THE CODE NUMBER THROUGH APPLICATION ACKNOWLEDGEMENT NUMBER **2951728632** Date **15-05-2015** AND IS A MANDATORY PART OF THE CODE ALLOTMENT LETTER]

1. Name of the Establishment : AVI SOLAR ENERGY PRIVATE LIMITED

2. Code Number of the Establishment under EPF Scheme 1952: BGBNG1312614

3. Postal address of the Establishment and its branches: NO 146/4 SHANTHALA PLAZA 2ND FLOOR 8TH MAIN 14 TH CROSS MALLESHWARAM [No Branch]

4. Industry or business in which engaged: ELEC, MECH OR GEN ENGG PRODUCTS

5. Date of commencement of business: 23-08-2010

6. Date of closure by previous management : N/A

7. Whether run by owner or lessee: Run by Owner

8. Particulars of owners:

Name	Date of Birth	Status	Father's Name	Residential Address	Date From Which In Position
(a)	(b)	(c)	(d)	(e)	(f)
Mr. ASHOK D M	05-06-1970	MANAGING DIRECTOR	BASAPPA MARULAPPA	NO 122 SOBHA ZIRCON JAKKUR PLANTATION BANGALORE 560064	07-09-2010
Mr. K G VIDYASAGAR	23-04-1961	DIRECTOR	GOVINDARAJAN	GOLDEN GRAND APARTMENT FA 201 2ND FLOOR FERN A BLOCK NO 8 YESHWANTHPURA MAIN ROAR BANGALARE 560022	26-11-2012

^{9.} In case on lease, particulars of lessee: N/A

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^{10.} If registered under Factories Act, particulars of Manager or occupier. N/A

11. Particulars of persons mentioned above who are in charge and responsible for conduct of business of the establishment.

Name	Date of Birth	Status	Father's Name	Residential Address	Date From Which In Position
(a)	(b)	(c)	(d)	(e)	(f)
Mr. ASHOK D M	05-06-1970	MANAGING DIRECTOR	BASAPPA MARULAPPA	NO 122 SOBHA ZIRCON JAKKUR PLANTATION BANGALORE 560064	07-09-2010
Date:				Signature of employer	
				Name of Employer Designation of Employer	
Seal of Establishment				Mobile number	

Note: Any change in the information given above should be intimated in writing to the Regional Commissioner within fifteen days of such change by registered post and in prescribed manner.

ANNEXURE - I

Details of Branches of the Establishment

Name Of Unit	Address	State	District	PIN	Unit Type	No Of Employee
No branch declared in online application for code number BGBNG1312614						

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SPECIMEN SIGNATURE CARD

To be submitted with all documents after the Code number is allotted through the online application.					
FULL NAME OF THE AUTHORISED SIGNATORY					
NAME OF ESTABLISHMENT : AVI SOLAR ENERGY PRIVATE LIMIT	ĒD				
ADDRESS OF ESTABLISHMENT : NO 146/4 SHANTHALA PLAZA 2ND FLOOR, 8TH MAIN 14 TH CROSS MALLESHWARAM,KARNATAKA,BANGALORE,560003					
CODE NUMBER OF ESTABLISHMENT : BGBNG1312614000					
STATUS OF THE SIGNATORY: # EMPLOYER / AUTHORISED SIGNATORY # Strike whichever is not applicable					
SPECIMEN SIGNATURE	1				
	2				
	3				
SPECIAL INSTRUCTION, IF ANY					
SPECIMEN SIGNATURE OF Mr/Ms	ATTESTED				
	Signature of employer				
	Name of employer				
Seal of the establishment	Designation/Status of employer				
	Mobile number				
[] Please tick if "Not Applicable" due to upload of digital signature					

To be submitted separately for each Authorised Officer, if more than one.

Not to be submitted in this format if the employer after allotment of code number has uploaded digital signatures of the Authorised signatories. In such case the letter generated from the portal after uploading the digital signature(s) to be sent.

In case of upload of digital signature, when page (6) specimen signature card is not applicable, strike this, but keep as enclosure to the form 5A.

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