



NOTICE OF ATTORNEY
FORM 3(N)
Extrajurisdictional Limited Partnership
Partnership Act

New West Partnership Trade Agreement

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Partnership Act for the purposes of assessment.

Please refer to the instructions when completing this Notice of Attorney.

SECTION A: Submitting Party Information (Required)
SECTION B: Limited Partnership Information (Required)

Complete sections below to change the attorney information. The attorney may be a resident of British Columbia or a company incorporated in British Columbia. Both the mailing and delivery address must be provided.

SECTION C: Name and Address of Ceasing Attorney (When changing Attorneys enter the name of the Attorney being removed.)
SECTION D: Name and Address of New Attorney (When changing Attorneys enter the name of the new Attorney.)



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SECTION E: Change of Address of Attorney (Complete to change the address of an Attorney on file.)

Attorney Name: Last Name, First Name OR Company Name

Attorney Mailing Address: Box/Street Number, City/Town, Province and Postal Code (must be in B.C., can be a post office box)
(The Mailing Address must be a location inside B.C., and can be a post office box. If the Attorney is a corporation, the mailing address of the registered office is required.)
(Not required if the Attorney is an individual)

Attorney Delivery Address: Box/Street Number, City/Town, Province and Postal Code (must be in B.C., must be a physical address)
(The Delivery Address must be a physical location inside B.C. If the Attorney is a corporation, the delivery address of the registered office is required.)

SECTION F: Certified Correct - I have read this form and found it to be correct

Name of Authorized Signing Authority (Please print)

X

Signature

Relationship to the Extrajvincial Limited Partnership (Please print)

Date Signed (YYYY/MM/DD)

Note: Confirmation of Notice of Attorney will be mailed by BC Registry Services to the Submitting Party, each Attorney for Service and Attorney(s) Ceasing (if applicable).



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INSTRUCTION SHEET

Form with sections: SECTION A: Submitting Party Information (Name, Mailing Address, Email, Telephone); SECTION B: Limited Partnership Information (Name, Home Jurisdiction, Registration Numbers); SECTION C: Name and Address of Attorney Ceasing; SECTION D: Change Name and Address of New Attorney.



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SECTION E: Change Address of Attorney
Attorney Name
Attorney Mailing Address
Attorney Delivery Address
SECTION G: Certified Correct
Name of Authorized Signing Authority (Authorized Representative)
Date Signed
Signature
Relationship to Partnership

- Additional sheet may be attached if there is more than one attorney for service in the Partnership.
The completed notice is sent to the home jurisdiction.