

**COMPANY ADMINISTRATION SERVICES AGREEMENT****Company name:****Registered number:****APPENDIX No. 6****ACCEPTANCE OF APPOINTMENT / REPLACEMENT OF CONTACT PERSON(S) AND  
UNDERTAKING OF DISCLOSURE**

I, the undersigned

.....

do hereby accept my appointment as Contact Person by the beneficial owners according to Appendix No. 5 of the present Agreement.

I hereby confirm and declare that I am aware of the responsibilities of Contact Person(s) as these are set out in the present Agreement, to which I hereby accept to be legally bound.

I hereby confirm and declare that I am in possession of information regarding all business and financial matters of the Managed Company and I am in close, constant and personal contact with all of the Beneficial Owners of the Managed Company, and as such I am in a position to obtain any information which may be required by the Management Company, or of which the Management Company ought and should be aware and informed of.

Furthermore I hereby undertake to inform the Management Company in writing of any and all changes in the details of the Managed Company as well as in the beneficial ownership of the Managed Company within 30 days of the date on which the change(s) took place.

Place and date: .....

Signature of Contact Person: .....

Name of Contact Person: .....