





**Certified True Extract of Minutes of the Meeting of the Board of Directors of \_\_\_\_\_**  
 \_\_\_\_\_ (Company Name) **held on \_\_\_\_\_** (Date) **at**  
 \_\_\_\_\_ (Time) **at which a quorum was present.**

**“IT WAS RESOLVED:**

1. **THAT** with effect from \_\_\_\_\_, the list of Authorized Signatories of the Company for signing various prescribed forms of, and/or giving written instructions to, The OTC Clearing Hong Kong Limited (“OTC Clear”) in connection with any matters arising from the Company’s participation and operations in the OTC Account and Settlement Information System (“OASIS”) be changed to the following and that:

any one of the Authorized Signatories signing alone shall be valid:

any two of the Authorized Signatories signing jointly shall be valid:

any two of Group A or any one of Group A plus any one of Group B of the Authorized Signatories signing jointly shall be valid:

company chop must be affixed in addition to signature(s).

company chop is not required to be affixed in addition to signature(s)

others: \_\_\_\_\_

No.	Full Name in English	Signing Group

2. **THAT** the aforesaid changes be communicated to OTC Clear in accordance with such requirements as it may prescribe for updating its records;
3. **THAT** the Company shall hold OTC Clear harmless against any and all claims that may arise by reason of OTC Clear acting on such written instructions of the Authorized Signatories and OTC Clear shall incur no liability for or in respect of any such action; and
4. **THAT** these resolutions supersede all previous authorizations and be communicated to OTC Clear and shall as between the Company and OTC Clear be conclusive evidence of the passing of such resolutions and remain in force until amending resolutions to supersede them have been passed by the Company’s Board of Directors and communicated to OTC Clear.”

**Certified By:**

\_\_\_\_\_  
 (Authorised Signature(s))  
 (with company chop, ONLY applicable if it forms part of your signing instruction)

\_\_\_\_\_  
 (Date Signed)

Full Name of Signatory(ies): \_\_\_\_\_

Position: \* Director/Company Secretary