

FORM -1-

STATEMENT OF PARTNERSHIP EXISTENCE

(Article 4 of Law N° 008/2021 of 16/02/2021 governing partnerships)

1. The name of the partnership is:

2. The registered address of the partnership is:

Sector :

District:

City/Province:

Street/Plot/House No:

Telephone:

Email

P.O. Box

IN WITNESS WHEREOF, the undersigned have executed this Statement of partnership existence this _____ day of _____, 20_____.

_____ (signature)

Authorized Partner

_____ (Names)

_____ (signature)

Authorized Partner

_____ (Names)

Note: Use a separate sheet if more than two partners.