

Nomination Form

[Pursuant to section 72 of the Companies Act, 2013 and rule 19(1) of the Companies (Share Capital and Debentures) Rules 2014]

To
ZOTA HEALTH CARE LIMITED
Zota House, 2/896 Hira Modi Street,
Sagrampura, Surat – 395002, Gujarat

I/We _____ the holder(s) of the securities particulars of which are given hereunder wish to make nomination and do hereby nominate the following persons in whom shall vest, all the rights in respect of such securities in the event of my/our death. In the event of death nominee have to produce before the Company.

(1) PARTICULARS OF THE SECURITIES (in respect of which nomination is made)

Nature of securities	Folio No.	No. of securities	Certificate No.	Distinctive Nos.	
				From	To
Equity Shares					
Equity Shares					
Equity Shares					
Equity Shares					
Equity Shares					
Equity Shares					

(2) (a) PARTICULARS OF THE NEW NOMINEE:

- i. Name:
- ii. Date of Birth:
- iii. Father/ Mother /Spouse name:
- iv. Nationality:
- v. Address:
- vi. E-mail id:
- vii. Relationship with the security holder:

(b) IN CASE NEW NOMINEE IS A MINOR –

- i. Date of Birth:
- ii. Date of attaining Majority:
- iii. Name of guardian:
- iv. Address of guardian:

Signature: _____

Name of the Security Holder

Signature of Witness with Name and Address:

Notes:

1. After filling the form forward this form in duplicate copy to Satellite Corporate Services Pvt. Ltd., Registrar and Transfer Agent (RTA) of the Company.
2. RTA of the Company will return the one Copy to the Shareholders after registering the details.

For office use only:

Name of the Employee	
Date of Registering nominee	
Signature	