


 Fill in the form on your computer or legibly by hand. Sign the form and send in the original. **More information on page 5.**

Skicka till | Send to

**Bolagsverket**

SE-851 81 Sundsvall, Sweden

**1. Org.nr | Registration no.**

**Företagsnamn | Business name**

**2. Kontaktperson | Contact person for this case** Fill in your email address and telephone number so we can contact you easily.

Kontaktpersonens förnamn och efternamn   Contact person's first name and surname		Företagsnamn   Business name	
Postadress   Postal address		Postnr   Postcode	Postort   Town/City
E-postadress   Email address		Telefonnr   Phone number daytime	Deposit account, if any, 3 digits

**3. Anmälan gäller | Application regarding**

<b>Adress   Address</b>			
<input type="checkbox"/> Företagets adress   Business address	<input type="checkbox"/> Företagets e-postadress   Business email address	<input type="checkbox"/> Företrädares adress   Address of the officials	<input type="checkbox"/> Revisors adress   Address of the auditor
<b>Bolagsordning   The articles of association</b>			
<input type="checkbox"/> Företagsnamn   Business name	<input type="checkbox"/> Säte   Registered office	<input type="checkbox"/> Redovisningsvaluta   Accounting currency	
<input type="checkbox"/> Styrelsegränser   Limits for the number of board members	<input type="checkbox"/> Räkenskapsår   Financial year	<input type="checkbox"/> Bolagsordningsändring   Changes in the articles of association	
Financial year during the changeover _____			
<b>Särskilt företagsnamn   Secondary business name</b>			
<input type="checkbox"/> Registrera särskilt företagsnamn   Registration of a secondary business name	<input type="checkbox"/> Ändra särskilt företagsnamn   Change a secondary business name	<input type="checkbox"/> Avregistrera särskilt företagsnamn   Striking off register of secondary business name	
<b>Företrädare och revisor   Officials and auditor</b>			
<input type="checkbox"/> Styrelse   Board members Deputy members Chair of the board Managing director Deputy managing director Specially authorized signatories Firmateckning   Signatory power	<input type="checkbox"/> Särskild delgivningsmottagare   Person authorized to receive service of process	<input type="checkbox"/> Revisorer   Auditors Deputy auditors Accounting firm Auditor in charge Lay auditors	
<b>Annat   Other matters</b>			
<input type="checkbox"/> Uppdelning/sammanläggning av aktier   Split or consolidation of shares	_____ Total number of shares after split/consolidation	<input type="checkbox"/> Andra ändringar   Other changes	_____

**4. Företagets nya adress | New business address**

Postadress   Postal address	
Postnr   Postcode	Postort   Town/City
E-postadress   Email address	
<input type="checkbox"/> Ta bort e-postadressen   Remove registered email address	

**5. Företagsnamn | Business name** Give more than one proposal.

Förslag nr 1   Proposal no.1
Förslag nr 2   Proposal no.2
Förslag nr 3   Proposal no.3

**6. Särskilt företagsnamn | Secondary business name** Add an extra business name for a part of the business activities.

Förslag nr 1   Proposal no.1
Förslag nr 2   Proposal no.2

**7. Verksamhet för särskilt företagsnamn | Business activities under the secondary business name** These must be a part of the main business's business activities. Write in Swedish.

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**8. Styrelseledamöter | Board members**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**9. Styrelsesuppleanter | Deputy members of the board**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	Arbetstagarrepresentant   Employee representative <input type="checkbox"/>
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**10. Styrelseordförande | Chair of the board** is appointed only if the board consists of more than one board member.

Personnr   Personal identity number	Efternamn   Surname	Förnamn   First name
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**11. Verkställande direktör | Managing director**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**12. Vice verkställande direktör | Deputy managing director**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**13. Särskild firmatecknare | Specially authorized signatory**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**14. Särskild delgivningsmottagare | Person authorized to receive service of process**

Personnummer   Personal identity number		
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**15. Revisor | Auditor**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**16. Revisorssuppleant | Deputy auditor**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**17. Revisionsbolag | Accounting firm** if appointed as auditor.

Namn, revisionsbolaget   Business name of the accounting firm	Organisationsnummer   Registration number	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
<b>Huvudansvarig revisor   Auditor in charge</b>		
Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**18. Lekmannarevisor | Lay auditor**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**19. Lekmannarevisor, suppleant | Deputy lay auditor**

Personnummer   Personal identity number	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn   Surname	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

**20. Firmateckning | Signatory power** This must always be stated when changing the board of directors, managing director, deputy managing director or other appointed signatories.

<input type="checkbox"/> 1) Firman tecknas av styrelsen (ordinarie styrelseledamöter)   The board of directors is entitled to sign on behalf of the company (the ordinary board members).	<input type="checkbox"/> 2) Registrerad firmateckning ska inte ändras   Registered signatory power remains unchanged.
<input type="checkbox"/> 3) Firman tecknas av styrelseledamöten/styrelseledamöterna och styrelsesuppleanten/styrelsesuppleanterna var för sig   The board member(s) and the deputy member(s), individually, are entitled to sign on behalf of the company.	<input type="checkbox"/> 4) Firman tecknas av styrelseledamöterna var för sig   The board members, individually, are entitled to sign on behalf of the company.
<input type="checkbox"/> 5) Firman tecknas av styrelseledamöterna två i förening   Any two board members, together, are entitled to sign on behalf of the company.	<input type="checkbox"/> 6) Firman tecknas enligt nedan   The entitlement to sign on behalf of the company is as stated below:

Fyll i eventuell annan firmateckning här | If applicable, fill in another alternative for signatory power here. Write in Swedish.

**21. Personer eller revisionsbolag som har avgått från sina uppdrag | Individuals or accounting firms that have resigned from their assignments**

Namn   Name	Uppdrag   Assignment eg board member, managing director, signatory, auditor

**22. Övrigt | Other matters**

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**23. Försäkran och underskrift | Declaration and signature** The form must be signed by a board member, by the managing director or by the official for whom the changes apply. Please use blue ink.

<b>I do hereby solemnly declare that</b>		
<ul style="list-style-type: none"> <li>the individuals to be registered through this application have accepted their assignments</li> <li>the information in this application regarding appointments or resignations, the signatory power and the secondary business name corresponds to the resolutions that this application is based on</li> <li>the individuals to be registered through this application do not have custodians as stated in chapter 11, section 7 of the Swedish Parental Code</li> <li>the individuals to be registered have not been declared bankrupt (applies to all except the person authorized to receive service of process)</li> <li>the auditors meet the qualification requirements as stated in chapter 9, sections 10-13 of the Swedish Companies Act</li> <li>the auditors meet the qualification requirements as stated in chapter 10, section 9, first paragraph of the Swedish Banking and Financing Business Act (only applies if the company in question is a credit market company)</li> <li>the lay auditors meet the qualification requirements as stated in chapter 10, section 9 of the Swedish Companies Act.</li> </ul>		
Datum   Date	Namnteckning   Sign name	Namnförtydligande   Print name

**24. Registreringsavgift | Registration fee** Pay the fee to bank giro number 5050-0255.

Betalt belopp   Amount paid	Datum   Date of payment	
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## Information

Use this form when you want to register changes for a limited company, or use the e-service on the website [verksamt.se](http://verksamt.se) (in Swedish only). E-services and more information are available on [bolagsverket.se](http://bolagsverket.se). Please note that all documents must be in Swedish. When the application has been registered we will send you a registration certificate in Swedish.

### 1. Registration no. and business name

Fill in the company registration number and the business name.

### 2. Contact person for this case

If you choose to have a contact person or if the company has an agent, fill in their personal and address details. Please note that we usually send notifications by email. If you do not fill in an email address, we will send notifications by post.

If the agent has a deposit account with Bolagsverket and wants to use it for payment of the registration fee, you must also fill in the three-digit account number.

### 3. Application regarding

State the changes you want to notify us of for registration. Some changes must be added directly in the articles of association which must be submitted as an attachment with this form. Read more below.



#### Attachments – when changing the articles of association

- Minutes from the shareholders' meeting (certified copy) confirming that the new articles of association have been adopted.
- The new version of the articles of association.

#### Change the financial year

If you want to change the financial year, tick the box Financial year. Fill in the financial year during the changeover, including year, month and date, eg 2014-07-01–2015-12-31. You must also write the change in the articles of association. You may change only the current or the coming financial year.

A new financial year may not be used before it has been registered. The changeover financial year may therefore be shortened or sometimes extended to a maximum of 18 months. For further information, see the information brochure, Omläggning av räkenskapsår, SKV 424 (in Swedish only) on the Swedish Tax Agency's website.

#### Change the business activities

If you want to change the business activities, tick the box for Changes in the articles of association. Describe the business activities in detail in the articles of association. Be precise about which line of business the business activities belong to, for example shoe retail or consulting business within IT.

#### Change the limits of the share capital

If you want to change the limits of the share capital, tick the box for Changes in the articles of association and make the change in the articles of association.

#### Choose not to have an auditor

The articles of association must state whether the company will have an auditor or not. Many smaller private limited companies may add a clause in the articles of association stating that they choose not to have an auditor. If you are removing the auditor, tick the changes that apply, such as Changes in the articles of association and Auditors.

#### Other matters

State other changes here such as a split or consolidation of shares. If the company is going to split or consolidate its shares, you must state the total number of shares the company has after the split or consolidation is completed. A specific resolution on the consolidation or split of shares must also be included in the minutes of the shareholders' meeting. Special rules apply for limited companies with their shares registered at the Central Securities Depository.

### 4. The new business address

Fill in the new address as well as the email address, if any. If you want to remove the registered email address, please tick the box. Please note that you must always change your address both directly with Bolagsverket and with Svensk Adressändring.

## 5. Business name

State more than one business name proposal. If you submit more than one proposal, we will examine them in the order you have listed them in. We will register the first proposal we examine which we are able to accept, without first contacting you. Read more about choosing a business name on [bolagsverket.se](http://bolagsverket.se).



### Attachments

- Minutes of the shareholders' meeting (certified copy) confirming that the new articles of association have been adopted.
- The new version of the articles of association (a copy).

## 6. Secondary business name

The secondary business name is a separate name for a specific part of the business. The secondary business name should not be mentioned in the articles of association. Fill in more than one proposal for secondary business name.

## 7. Business activities under the secondary business name

Fill in the business activities to be carried out under the secondary business name. Be exact when defining the line of business. The business activities under the secondary business name must be a part of the business activities of the main company.

## 8. Board members

Fill in the personal and address details of newly appointed board members or details such as a change of address. Individuals who are not registered in the Swedish population register must fill in their country of residence. Please note that you must fill in box 20. Signatory power, when changing the board.

You must also fill in details of the board members and deputy members who have been appointed as employee representatives and tick the box Employee representative.

In a private limited company the board of directors may consist of one or more board members. If fewer than three board members have been appointed, at least one deputy member must be appointed. Public limited companies must have at least three board members.

The following individuals must be resident within the European Economic Area (EEA)

- at least half of the board members and the deputy members (counted separately)
- the managing director
- the deputy managing directors
- at least one of the signatories.

If the company does not fulfil these requirements, you may apply to Bolagsverket for exemption.



### Attachments

- Minutes of the shareholders' meeting (certified copy) showing the appointment of new board members and deputy members. The minutes must also be enclosed when reducing the number of board members or deputy members.
- A certified copy of passport or other identification document for each person who is not registered in the Swedish population register.\*
- An application for exemption if the residence requirements are not fulfilled.
- A certified copy of the minutes or similar document from the trade union (the appointing body) confirming the appointment of the employee representative.

## 9. Deputy members of the board

Fill in the personal and address details of the deputy members of the board. Read more under 8. Board members.

## 10. Chair of the board

If the board of directors consists of more than one board member, the board must appoint a chair of the board. Fill in the personal details of the chair of the board here.

## 11. Managing director

If the company has a managing director, fill in their personal and address details. In public limited companies the board must appoint a managing director who is not the chair of the board.

**Attachment**

- A certified copy of a passport or other identification document for each person who is not registered in the Swedish population register.\*

**12. Deputy managing director**

If the company has a deputy managing director, fill in their personal and address details here. Read more under 11. Managing director.

**13. Specially authorized signatory**

If there are other individuals (not board members) who are authorized to sign on behalf of the company, fill in their details here. Fill in the details in box 22. Other matters, if more than one person will be registered. You must also fill in box 20. Signatory power.

**Attachment**

- A certified copy of a passport or other identification document for each person who is not registered in the Swedish population register.\*

**14. Person authorized to receive service of process**

If the company does not have an authorized representative who is resident (domiciled) in Sweden, the board must appoint a person who is authorized to receive service of process. Fill in the personal and address details of this person here. Only board members, specially authorized signatories and the managing director are considered to be authorized representatives.

The person authorized to receive service of process must be registered in the Swedish population register. Please note that a person authorized to receive service of process should only be registered when required to by law.

**15. Auditor**

If the company has an auditor, fill in their personal and address details here. The auditor must be authorized or approved. An authorized auditor is required in the cases mentioned in chapter 9, section 13 of the Swedish Companies Act. Read more under 3. Application regarding – Choose not to have an auditor.

**Attachment**

- Minutes of the shareholders' meeting (certified copy) confirming the appointment of auditor.

**16. Deputy auditor**

If the company has appointed a deputy auditor, fill in their personal and address details here. If an authorized auditor is required by law, at least one of the deputy auditors must also be authorized. Read more under 15. Auditor.

**17. Accounting firm**

If the company has chosen an accounting firm, you must fill in the details here, as well as the personal and address information of the auditor in charge. You can also fill in the details of an accounting firm that is the deputy auditor here. State that the information refers to a deputy auditor in box 22. Other matters. Read more under 15. Auditor.

**Attachment**

- Minutes of the shareholders' meeting (certified copy) confirming the appointment of accounting firm. If the company has only changed the deputy auditor, the attachment is not needed.

**18. Lay auditor**

If the company has a lay auditor, fill in their personal and address details here. Read more under 15. Auditor.

**Attachment**

- Minutes of the shareholders' meeting (certified copy) confirming the appointment of lay auditor.

**19. Deputy lay auditor**

If the company has appointed a deputy lay auditor, fill in their personal and address details here. Read more under 18. Lay auditor.

**20. Signatory power**

Please note that you must always fill in the box regarding signatory power when a change has been made regarding the board of directors, managing director, deputy managing directors or specially authorized signatories. State the signatory power that applies for the company.

The board of directors (the ordinary board members) is always entitled to sign on behalf of the company, even if you choose another option than alternative 1 for the signatory power. The alternative 'Registered signatory power remains unchanged' means that the board of directors has taken a decision regarding the signatory power, implying that the signatory power is unchanged.

### **21. Individuals or accounting firms that have resigned from their assignments**

Fill in the name and position of the individuals or accounting firms that have resigned. If an accounting firm has resigned, remember to also fill in the details of the auditor in charge.

#### **Did the auditor resign prematurely?**

If an auditor's assignment ends prematurely, the auditor and the appointing party must both notify Bolagsverket the reasons for this. Fill in your reasons for the resignation in box 22. Other matters.

The auditor must always submit a statement about the examination they have carried out during the length of their assignment during the current financial year. The auditor's reasons and statement may be filed separately.

### **22. Other matters**

Fill in extra information here. You may also fill in the reason for an auditor's premature resignation here.

### **23. Declaration and signature**

A board member, the managing director or the person referred to in the changes on the form must sign the form.

### **24. Registration fee**

Please state the amount you will pay and the payment date. Pay the fee to bank giro number 5050-0255 and give the company registration number as the payment reference. We can start processing your application when we have received the payment. We cannot refund the payment once we have begun processing your case.

\* The copy must contain name, date of birth, validity dates, signature and photo. Copy the whole double-page spread in the passport containing the photo page or both sides of the identification document. At least one other person must sign the copy to certify that it matches the original. Their signature, printed name and telephone number must be included on the copy.