



**GOVERNMENT OF INDIA
MINISTRY OF CORPORATE AFFAIRS**

Central Registration Centre

Certificate of Incorporation

[Pursuant to sub-section (2) of section 7 and sub-section (1) of section 8 of the Companies Act, 2013 (18 of 2013) and rule 18 of the Companies (Incorporation) Rules, 2014]

I hereby certify that NATURAL GAS INDIA PRIVATE LIMITED is incorporated on this Seventeenth day of December Two thousand twenty under the Companies Act, 2013 (18 of 2013) and that the company is limited by shares.

The Corporate Identity Number of the company is U23300UP2020PTC139374.

The Permanent Account Number (PAN) of the company is **AAHCN3415E** *

The Tax Deduction and Collection Account Number (TAN) of the company is **MRTN05073F** *

Given under my hand at Manesar this Seventeenth day of December Two thousand twenty .



Digital Signature Certificate

Mr MANGAL RAM MEENA

Deputy Registrar Of Companies

For and on behalf of the Jurisdictional Registrar of Companies

Registrar of Companies

Central Registration Centre

Disclaimer: This certificate only evidences incorporation of the company on the basis of documents and declarations of the applicant(s). This certificate is neither a license nor permission to conduct business or solicit deposits or funds from public. Permission of sector regulator is necessary wherever required. Registration status and other details of the company can be verified on www.mca.gov.in

Mailing Address as per record available in Registrar of Companies office:

NATURAL GAS INDIA PRIVATE LIMITED

LINC 905, GRARND OMAXE EXPRESSWAY, SECTOR-93B, NOIDA,

Gautam Buddha Nagar, Uttar Pradesh, India, 201304



* as issued by the Income Tax Department

Form No. INC-22

Notice of situation or change of situation of registered

[Pursuant to section 12(2) & (4) of The Companies Act, 2013

and Rule 25 and 27 of The Companies (Incorporation) Rules, 2014]

Refer the instruction kit for filing the form

All fields marked in * are mandatory



Form language

☒ English

☐ Hindi

1 Company

(a)*Corporate Identity Number (CIN)

U23300UP2020PTC139374

(b) *Name of the company

NATURAL GAS INDIA PRIVATE LIMITED

(c) *Address of the registered office of the company

LINC 905, GRARND OMAXE EXPRESSWAY
SECTOR-93B,NA,NOIDA,Gautam Buddha Nagar,Uttar
Pradesh,India,201304.

(d) *Email ID of the company

md@zakventure.com

2 *Purpose of filing of form

Change within the local limits of city, town or
village

Verification of registered office post incorporation of company/

Change within the local limits of city, town or village /

Change outside the local limits of city, town or village, within the same ROC and state/Change in ROC within the same state/

Change in state within the jurisdiction of existing ROC/Change in State outside the
jurisdiction of existing ROC

3 (a) *Have you filed MGT-14?

☐ Yes

☐ No

(a)(i) If yes, enter service request number (SRN) of Form MGT-14

(b) *Have you filed INC-28?

☐ Yes

☐ No

(b)(i) If yes, enter service request number (SRN) of Form INC-28

4 Notice is hereby given

(a) *The address of the registered office of the company is situated w.e.f

01/04/2023

(DD/MM/YYYY) at

* Address Line 1

36, Model Town

Address Line 2

*Country

India

*Pin code/Zip code

201002

*Area/locality

Kamla Nehru Nagar

*City

Ghaziabad

District

Ghaziabad

*State/Union territory

Uttar Pradesh

*Longitude

77.437523

*Latitude

28.65287

5 Name of office of Proposed RoC or new RoC

Attachments

(a) *Proof of Registered Office address (Conveyance/Lease deed/Rent Agreement etc. along with the rent receipts) along with standard NOC in case of Leased or rented property

Rent Deed.pdf

(b) *Copies of the utility bills (not older than two months)

Elecbill.pdf

(c)*Photograph of Registered Office showing external building and inside office also showing therein at least one director/ KMP who has affixed his/her Digital Signature to this form.

Office_Photograph.pdf

(d) Optional attachment(s) - if any

MAX 2MB

Declaration

I* PINKY QAISER

a person named in the articles as a (Director/Manager/Company Secretary) of the company

have been authorized by the Board of Directors of the Company vide resolution no 01

dated (DD/MM/YYYY)* 01/04/2023 to sign this form and declare that

* ☒ All the requirements of the Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with.

* ☒ I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

☒ It is hereby further certified that MANOJ KUMAR, a Chartered accountant (in whole time practice)

[Chartered accountant (in whole time practice)/ Company secretary (in whole time practice)/ Cost accountant (in whole time practice)]

having Membership number 520756

and certificate of practice no

certifying this form has been duly engaged for this purpose.

To be digitally signed by

*Designation

Director

(Director/Manager/Company Secretary/CFO/ CEO)

*Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the Company Secretary

06436683

Certificate by Practicing Professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of The Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original records maintained by the company which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:

1. The said records have been properly prepared, signed by the required officers of the company and maintained as per the relevant provisions of The Companies Act, 2013 and were found to be in order;

2. All the required attachments have been completely and legibly attached to this form;

3. I further declare that I have personally visited the registered office given in the form at the address mentioned herein above and verified that the said registered office of the company is functioning for the business purposes of the company.

To be digitally signed
by

Category

☒ Chartered accountant (in whole-time practice)

☐ Cost accountant (in whole-time practice)

☐ Company secretary (in whole-time practice)

Whether

☐ Associate

☒ Fellow

Membership number

520756

Certificate of Practice number

Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively.

The eForm has been taken on the file maintained by the registrar of companies through electronic mode and on the basis of statement of correctness given by the filing company.

For office use only:

eForm Service request number (SRN)

AA1784559

eForm filing date (DD/MM/YYYY)

03/04/2023

Digital signature of the authorizing officer

This eForm is hereby registered

Date of signing (DD/MM/YYYY)