

FORM NO. SH-7

[Pursuant to section 64(1) of the Companies Act, 2013 and pursuant to rule 63 of the Companies Rules, 2014]



Notice to Registrar of any alteration of share capital

Form language (Eng	glish (Hindi		
Refer the instruction kit for	filing the form.		
1.(a)* Corporate identity num (b) Global location number	065990RJ2020PLC071653		
2.(a) Name of the company	MONEYBAG FINSERVE LIMITED		
(b) Address of the registered office of the company	A-11 Ganga Mata Mandir, Opp Janana Hospital Station Road, Jaipur Jaipur Rajasthan 302006		
(c) email ld of the company	mfpl.nbfc21@gmail.com		
3. ⁻ Purpose of the form			
Increase in share ca	apital independently by company Increase in number of members		
	apital with Central Government order Consolidation or division etc. Cancellation of unissued shares of one class a increase in shares of another class		
4. In accordance with section	61(1) of the Companies Act, 2013, that by Ordinary Special resolution at		
the meeting of the members			
(a)(i) The authorised share	capital of the company has been increased from		
Existing	(in Rs.) 1,000,000.00		
Revised	(in Rs.) 22,500,000		
Difference (addition)	(in Rs.) 21,500,000.00		
6. The additional capital (taki	ring into consideration the addition above) is divided as follows		
(a) Number of equity shares	2,150,000 Total amount of equity shares (in Rs.) 21,500,000.00		
(b) Number of preference shar			
Total addition (in Rs.	i.) 21,500,000.00 (in Rs.)		
The conditions (e.g. voting rig	ghts, dividend rights, winding-up rights, etc.) subject to which new shares have been		
issued, are as follows			
1 (1 - 4 - 4)			



			8 above
Revised capital structure after tak	ing into considerat	ion the changes vide points 4, 5, 6, 7 and	7
(a) Authorised capital of the compan	y (in Rs.) 2	2,500,000.00	
Break up of Authorised capital	_		
Number of equity shares	2,250,000	Total amount of equity shares (in Rs.)	22,500,000.00
Nominal amount per equity share	10		
Number of preference shares	0	Total amount of preference shares (in Rs.)	
Nominal amount per preference share		Er ingelegen (1900)	
Number of unclassified shares		Total amount of unclassified shares (inRs.)	
(b) Issued capital of the company	(in Rs.) 1	,000,000.00	
Break up of Issued capital	_	7	
Number of equity shares	100,000	Total amount of equity shares (in Rs.) (in Rs.)	1,000,000.00
Nominal amount per equity share	10	•	
Number of preference shares		Total amount of preference shares	
Nominal amount per preference share			
	Special English	mpgately are to the control of	
(c) Subscribed capital of the compar	ný (in Rs.)	,000,000.00	
Break up of Subscribed capital			
Number of equity shares	100,000	Total amount of equity shares (in Rs.)	1,000,000.00
Nominal amount per equity share	10		
Number of preference shares		Total amount of preference shares	
Nominal amount per preference share		(in Rs.)	
(d)`Paid up capital of the company	(in Rs.)	,000,000	
Break up of Paid up capital	_	418	
Number of equity shares	100,000	Total amount of equity shares (in Rs.)	1,000,000.00
Nominal amount per equity share	10		
Number of preference shares		Total amount of preference shares	
Nominal amount per preference share	•	(in Rs.)	
10. Whether articles of association h	ave been altered	Yes 🖲 No	

11.Particulars of payment of stam	p duty (Refer ins	truction kit for details before filling the	particulars)
(a) State or Union territory in respec duty is paid or to be paid			Pre-fill
(b) Whether stamp duty is to be pai	d electronically thr	rough MCA21 system (a) Yes () No	Not applicable
(i) Details of stamp duty to be pai		0 0	0
Amount of stamp duty to be pa		43,000	
(ii) Provide details of stamp duty a	lready paid		
Type of document/Particulars		Form SH-7	
Total amount of stamps or stamp paper (in Rs.)			
12.In case maximum stamp duty pa receipt number, form number, da		been paid, provide details of form(s) filled at of stamp duty paid)	earlier (SRN or
receipt flumber, form flumber, au		, ,	
		grant carrier	*
13. Existing capital structure before t	aking into conside	eration the changes vide points 4, 5, 6, 7 ar	nd 8 above
(a) Authorised capital of the compar	ny (in Rs.)	1,000,000.00	,
Break up of Authorised capital			_
Number of equity shares	100,000	Total amount of equity shares (in Rs.)	1,000,000.00
Nominal amount per equity share	10		
Number of preference shares	0	Total amount of preference shares (in Rs.)	
Nominal amount per preference share		131	
Number of unclassified shares		Total amount of unclassified shares (inRs.)	
(b) Issued capital of the company	(in Rs.)	1,000,000.00	
Break up of Issued capital			
Number of equity shares	100,000	Total amount of equity shares (in Rs.) (in Rs.)	1,000,000.00
Nominal amount per equity share	10		
Number of preference shares	0	Total amount of preference shares	
Nominal amount per preference share			
(c) Subscribed capital of the compa	ny (in Rs.)	1,000,000.00	
Break up of Subscribed capital	7	erze i Alice esta esta el	
Number of equity shares	100,000	Total amount of equity shares (in Rs.)	1,000,000.00



Nominal amount per equity share	10			
Number of preference shares		Tatal amount of profess	once shares	
Nominal amount per preference	0	Total amount of prefere	(in Rs.)	
share				
(d) Paid up capital of the company	(in Rs.)	,000,000		
Break up of Paid up capital				1
Number of equity shares	100,000	Total amount of equity	shares (in Rs.)	1,000,000.00
Nominal amount per equity share	10			
Number of preference shares	0	Total amount of prefere	nce shares	
Nominal amount per preference		- Total amount of project	(in Rs.)	
share				
Attachments			List of attac	hments
(1) Copy of the resolution for alterati	on of capital;	Attach	List of attac	, minerite
(5) Altered memorandum of associa	tion;	Attach	egmresolution	ı.pdf
(8) Optional attachments ,if any		Attach	NOTICE FOR Altered MOA	
				5
in the last				
	n		Remove att	achment
AMIT KUMAR ARORA	Declaration	1		
Director		of the		, a
requirements of the Companies Act,	2013 and the rules	made thereunder have be	mpany declare th	at all the
by the board of directors to give this	declaration and to	sign and submit this Form	It is further deals	h.l am authorized
vermed triat				
Whatever is stated in this form a material to the subject matter of	ind in the attachme	nts thereto is true,correct	and complete an	d no information
material to the subject matter of	this form has been	suppressed or concealed	and ic on man !!	
markamed by the promoters su	oscribing to the Me	morandum of Association	and Articles - f A	
2. 7 in the required attachments have	e been completely	, correctly and legibly attac	ched to this form	
3. I further declare that the compar	y has paid correct	stamp duty as per applica	ble Stamp Act.	
To be digitally signed by				
Director Director		AMIT Symbol start by KUMAR STATE ARORA SAN SAN SAN SAN SAN SAN SAN SAN SAN SA		
Director identification number of the	ne director; or			
DIN or PAN of the manager or CEO or CFO; or Membership number of the company secretary				



Certificate by practicing professional

It is hereby certified that I have verified the above particulars (including attachment(s)) from the records 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/certified records maintained by the Company/applicant 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:

The said records have been properly prepare maintained as per the relevant provisions of the Comp ii. All the required attachments have been comp	
·To be digitally signed by	BRIJ KISHAORE Cincled's service or BRU SHARMA Dea 1971 13. SHARMA Dea 1971 13.
Chartered accountant (in whole-time practice) or Company secretary (in whole-time practice)	Cost accountant (in whole-time practice) or
NAME Allows are a sixty of the Control of the Contr	- Mair
Membership number or Certificate of practice number	Fellow
	6206
Certificate of practice number	12636
Note: Attention is drawn to the provisions of section provide for punishment for false statement and pure .	on 448 and 449 of the Companies Act, 2013 which inishment for false evidence respectively.
Modify Check Form	Prescrutiny Submit
For office use only:	The last included installation
eForm Service request number (SRN)	eForm filing date (DD/MM/YYYY)
This e-form is hereby registered	
Digital signature of the authorizing officer	Confirm submission
Date of signing	(DD/MM/YYY)