FORM 6

NOTIFICATION

Pursuant to section 56(4) of the Securities Act, 2012 and By-Law 53 of the Securities (General) By-Laws, 2015

General Instructions:	Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced.	
	This form and any attachments should be certified in accordance with Item 7 of these Instructions.	
	Completed Forms should be submitted to:	
	The Director Disclosure Registration and Corporate Finance Division Trinidad and Tobago Securities and Exchange Commission Levels 22 – 23, Tower D, International Waterfront Centre, 1 Wrightson Road, Port of Spain, Trinidad and Tobago	
Item 1	State exact name as specified in the Registrant's national identification (in the case of an individual) or constituting or organizational documents.	
Item 2	State the registrant's primary business address, website, telephone numbers, email addresses and fax numbers.	
Item 3	Please mark "x" by the relevant checkbox to indicate the registrant's category or categories of registration.	
Item 4	Identify the type of change that is the subject of this Form, by stating the reference letter [(a), (b), (c), (d) etc.] under the associated column listing for either List A or List B which is associated with stated prescribed events. Refer to List A or List B of Schedule 3 of the By-Laws for the reference letter.	

Item 5	Attach and mark as an exhibit to this Form a statement of particulars of any change to any information set out in List A or List B of Schedule 3 of the Bylaws. These particulars should include the date and details of the event that caused the submission of this Form. Where applicable, also include certified copies of any documents supporting the change.		
Item 6	State the name, business telephone number and email address of the senior officer of the registrant who is knowledgeable about the notice and who may be contacted for discussions.		
Item 7	Date the application. Certify this form and any attachment(s), by including the signature of the Registrant (if an individual) or the signatures of the Chief Executive Officer and two directors of the Registrant (if a company). Where the Chief Executive Officer is unavailable to sign the form, the form should be signed by any other duly authorized senior officer whose proof of authorization must be submitted with this form.		
	MISSION AND AND AND AND AND AND AND AND AND AN		

FORM 6

NOTIFICATION OF CHANGE

Pursuant to section 56 (4) of the Securities Act, 2012 and By-Law 53 of the Securities (General) By-Laws, 2015

1.	NAME OF REGISTRANT					
	Name of Registrant					
2	CONTACT DETAILS OF REG	AND AND				
2.	JISTRANT					
	Primary Business					
	Address					
	Work Phone	Fax Phone				
	(1-xxx-xxx-	(1-xxx-				
	xxxx) Mobile	xxx-xxxx) Email				
	Phone (1-	Address				
	xxx-xxx-	- Address				
	xxxx)					
	= 0	STAN MORNEY STAN STAN STAN STAN STAN STAN STAN STAN				
3.	CATEGORY OF REGISTRAT	ION				
	Broker Dealer	William Control				
	Investment Adviser (only)					
	Underwriter					
	Reporting Issuer					
1	TYPE OF CHANGE AS PER	SCHEDULE 3 OF SECURITIES (GENERAL) BY-				
т.	LAWS, 2015	SCHEDULE 3 OF SECONTIES (GENERAL) BT-				
	List A	List B				

5. DETAILS OF CHANGES See General Instructions

6. CONTACT PERSON AT REGISTRANT

Name (First		
Name, Last		
Name)		
Position in		
Organization		
Work Phone (1-	Fax Phone(1-	
xxx-xxx-xxxx)	XXX-XXX-	
ext. xxx	xxxx)	
Mobile Phone (1-	Email	
xxx-xxx-xxxx)	Address	

7. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

Print Name	Print Name	Print Name	
Signature	Signature	Signature	
Position	Position	Position	
	Date		

FOR OFFICIAL USE ONLY

Tool	ID Information
Registrant's Number	
Director's Number	
Document / Record Number	
Record's Management Date Received (dd/mm/yyyy)	
Approved By: Da	te (DD/MM/YYYY)

