Companies and Intellectual Property Commission
Republic of South Africa

AU MIN AFRICA LTD

Form CoR 14.1

Annexure D

- This form is issued in terms of section 13 of the Companies Act, 2008, and Regulation14 of the Companies Regulations, 2011.
- Use of Annexure D is optional. It may be used by the incorporators of any company to give notice of the initial appointments of a company secretary, auditor or members of an audit committee.
- For further reference, see section 85 (4) of the Act.
- A company is not registered until the Commission has issued a Registration Certificate in Form CoR 14.3.

Notice of Incorporation
Notice of Company Appointments

The Incorporators advise that the following persons have been appointed, and consented to serve, as the initial company secretary, auditor, or members of the audit committee of the company, as indicated. AU MIN AFRICA LTD

For each person listed, provide the information as indicated:

Name and Address	Identity, Registration or Practice Number	Office to which appointed
Bongiwe Buyiswa MBINA #147 Grosvenor Rd. Bryanston, Bryanston Gauteng. SA. 2021	466931063 840607 0948089	CCAO - Chief Compliance & Administrative Officer / Secretary & Comptroller
Marco Ilano Room 201, De Leon Building, Pabayo-Pacana St., Cagayan de Oro 8600 Mindanao Island Philippines	PTR No. 87589-11 CPA Philippines Registered	Auditor MBA / CPA
Anthony Persia GALVAN Jose Panganiban Camarines Norte Philippines	CFO Consultant EC29386787	CFO / Treasurer

Contacting the Commission

The Companies and Intellectual Property Commission of South Africa

Postal Address
PO Box 429
Pretoria
0001
Republic of South Africa
Tel: 086 100 2472

www.cipc.co.za

For Commission Use only	Commission file number:	Date filed:

This form is prescribed by the Minister of Trade and Industry in terms of section 223 of the Companies Act, 2008 (Act No. 71 of 2008).

Companies and Intellectual Property Commission
Republic of South Africa

Form CoR 14.1

Annexure A

- This form is issued in terms of section 13 of the Companies Act, 2008, and Regulation 14 of the Companies Regulation, 2011.
- Annexure A must be completed and attached to the Notice of Incorporation when it is filed.
- A public company, or a state owned company, must have at least 3 initial directors.
- A non-profit company must have at least 3 initial directors.
- A private company, or a personal liability company, must have at least 1 initial director.
- A company is not registered until the Commission has issued a Registration Certificate in Form CoR 14.3

Contacting the Commission

The Companies and Intellectual Property Commission of South Africa

Postal Address
PO Box 429
Pretoria
0001
Republic of South Africa
Tel: 086 100 2472

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Notice of Incorporation
Initial Directors of the Company

The incorporators confirm that each person named below has consented to being appointed in terms of section 66 (7) (b) as a director of the company, whose Memorandum of Incorporation is attached. Au Min Africa Ltd.

Full name / former name, if any: Litha Siyabonga SWARTBOOI

Identity number: 7703115852081

Nationality: South African

Passport number, if not South African: A04656545

Date of appointment: April 7, 2015

Designation in the company: CEO / COO

Residential address: 144 Willow Crescent St. Ext 21 Phumula Roodekop Germiston SA 1431

Business address: 3RD Floor, Regus House, Fairview office Park Ring Road Greenacres, Port Elizabeth 6045

Postal address: P.O. Box 64015, Greenacres Port Elizabeth 6057

Occupation: Attorney & Legal Counsel

South African resident: ✓ (Yes) _____ (No)

AU MIN AFRICA LTD

For Commission Use only	Commission file number:	Date filed:

This form is prescribed by the Minister of Trade and Industry in terms of section 223 of the Companies Act, 2008 (Act No. 71 of 2008).

NOTARY ACKNOWLEDGEMENT CERTIFICATION & AUTHENTICATION

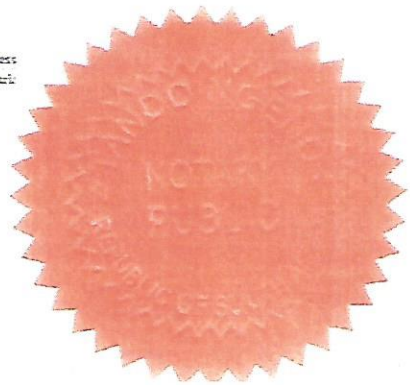
Republic of South Africa SS)

The undersigned certifies that I, **TANDO NGENO** is an independent certified and registered Notary Public of the Republic of the Philippines that on this 15th day of May, 2015 that on behalf of **AU MIN AFRICA LTD** (the "Company") I hereby authenticate and certify that each of the individuals whose name is set forth below currently holds the office as the Active Directors and Officers of the above Company, set forth below presented their individual Identification Numbers appearing opposite their names are their **Certified and Genuine Copy of their Original Passports and Identification Numbers**, were the same persons who executed the documents including this page and acknowledge to me that these same were of their own free and voluntary act and deed.

NAME OFFICER	POSITION	IDENTIFICATION / PASSPORT NUMBER
BONGIWE BUYISWA MBINA	CCAO – Chief Compliance & Administrative Officer/Comptroller/Secretary	840607 0948 087
LITHA SIYABONGA SWARTBOOI	CEO/COO Chief executive Officer / Chief Operating Officer	770311 5852 081

Doc No. _____
Page No. _____
Book No. _____
Series of 2015

NOTARY PUBLIC SEAL SIGNATURE

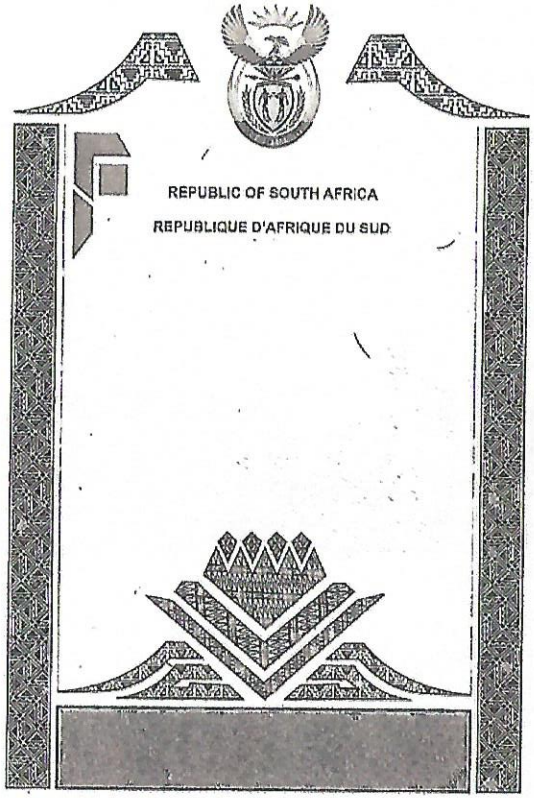


BOARD OF DIRECTOR

LITHA SIYABONGA SWARTBOOI

SOUTH AFRICAN PASSPORT
AND
ADDRESS VERIFICATION

PATRON
PATRON



In the Name of the President

The President of the Republic of South Africa requests all whom it may concern to allow the bearer of this passport to pass freely without let or hindrance and to afford the bearer all necessary assistance and protection.

Au Nom du Président

Le Président de la République d'Afrique du Sud, prie tous ceux que les présentes peuvent concerner de laisser passer librement et sans entrave le titulaire du présent passeport et de lui accorder toute aide et secours en cas de besoin.

DHA-110

A04656545

Passport / Passeport

REPUBLIC OF SOUTH AFRICA / REPUBLIQUE D'AFRIQUE DU SUD

Type / Type
PA

Country code / Code du pays
ZAF

Passport No / No du passport
A04656545

Surname / Nom
SWARTBOOI

Given names / Prénoms
SIYABONGA LITHA

Nationality / Nationalité
SOUTH AFRICAN / SUD-AFRICAIN

Date of birth / Date de naissance
11 MAR 1977

Identity No / No d'identité
7703115852081

Sex / Sexe
M

Place of birth / Lieu de naissance
ZAF

Date of issue / Date de délivrance
31 MAR 2015

Authority / Autorité
DEPT OF HOME AFFAIRS

Date of expiry / Date d'expiration
30 MAR 2025

Holder's signature / Signature du titulaire

PAZAFSWARTBOOI<<SIYABONGA<LITHA<<<<<<<<<<<<<

A046565459ZAF7703115M2503309770311585208l<88

GEREGISTREERDE WOON- EN POSADRES

1. Bewaar die bewys van u GEREGISTREERDE WOON- EN POSADRES in hierdie sakkie.

2. Indien u van adres verander het, of indien besonderhede van u huidige adres, bv. straatnaam en/of -nommer, ens. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakkie agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of gepos word aan die naaste streek-/distrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket.

2. If you have changed your address, or, if particulars of your present address, e.g. name of street and/or street number, etc., have been changed, the NOTICE OF CHANGE OF ADDRESS form in the pocket at the back of the identity document must be used to report the change and it must be handed in at or posted to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS.

1

I.D.No. 770311 5852 08 1

S.A.BURGER/S.A.CITIZEN

VAN/SURNAME

SWARTBOOI

VOORNAME/FORENAMES

SIYABONGA LITHA

GEBOORTEDISTRIK OF-LAND/
DISTRICT OR COUNTRY OF BIRTH

SOUTH AFRICA

GEBOORTEDATUM/
DATE OF BIRTH

1977-03-11



DATUM UITGEREIK
DATE ISSUED

1997-10-03

UITGEREIK OP GESAG VAN DIE DIREKTEUR-GENERAAL: BINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE DIRECTOR-GENERAL: HOME AFFAIRS

SUID-AFRIKAANSE POLISIEDIENS
KLIENTE DIENSSENTRUM
SUNNYSIDE

2014 -01- 10

SUNNYSIDE
CLIENT SE[illegible]
SOUTH AFR[illegible]

DRIVING LICENCE SADC ZA SOUTH AFRICA

CARTA DE CONDUCAO

LS SWARTBOOI



ID No	02/7703115852081	MALE	
Birth	11/03/1977 ZA	Restriction	1
License Number	40180004CW1P	No 1	
Valid	12/12/2012 - 11/12/2017		
Issued	ZA		
Code	C1		
Vehicle restriction	0		
First issue	14/10/2007		

LS SWARTBOOI

EK SERTIFISEER DAT HIERDIE [illegible] DRUK (AFSKRIF) IS WAS DIE OORSPRO[illegible] [illegible]ING VOORSELE IS. EK SERTI[illegible] DAAR NIE 'N WYSIGING OF [illegible] T AANGEBRING IS NIE.

I CERTIFY THAT T[illegible] OF THE ORIGINAL DOCU[illegible] [illegible]TION. I FURTHER C[illegible] [illegible]IT OR A CHANGE WAS NOT [illegible]

HANDTEKENING/SIGNATURE

RANG
RANK

MAGNOMMER
FORCE NUMBER

NAAM IN DRUKSKRIF
NAME IN PRINT

www.ekurhuleni.com

Ekurhuleni
METROPOLITAN MUNICIPALITY

a partnership that works

GERMISTON SERVICE DELIVERY CENTRE
P.O. Box 145
Germiston
1400

Enquiries: 011 - 999 0001
Katlehong: 011 - 999 1318 / 011 - 999 0398
Complaints: 0860 543 000
Fax: 011 - 825 7888

TAX INVOICE

Vat Reg No. 4280193493
Invoice number: 26056335192015/03/18

Name	L SWARTBOOI			Account number	2605633519
Ward number	41	Payments until	2015/03/18	Vat Reg. No.	
Street address		Electricity / Water deposit			Statement Date
		Cash		Guarantee	
144 ROODEKOP		340.00		0.00	2015/03/18
Township		Valuation			
		Site		Improvements	Total Value
ROODEKOP X21				170000	170000
ERF Number	N26 021 00004073	Portion	00144 0000 0000	Area m2	300

Date	Icon	Details	Charge (excluding VAT)	VAT	Charge (including VAT)
15/02/18		BALANCE BROUGHT FORWARD	-2137.95		-2137.95
		SUB TOTAL	-2137.95		-2137.95
		ASSESSMENT RATES			
15/03/18		ASS RATES RESIDENTIAL	112.77		112.77
15/03/18		VA-VALUE-EXCLUSION	-99.50		-99.50
		REFUSE REMOVAL			
15/03/18		REFUSE: DOMESTIC 1 X PER WEEK	97.57	13.66	111.23
15/03/18		REFUSE REBATE	-14.64	-2.05	-16.69
		WATER SERVICE			
15/03/18		METER-NO UKD5093 TARIFF: WATER-RESIDENTIAL			
		Curr = 492 Prev = 484 Cons = 8			
		Reading dates: Curr 15/03/05 Prev 15/02/02			
		6 kl PER MONTH FREE			
		WATER 8 - 6 = 2 kl	20.48	2.87	23.35
		SEWERAGE			
		METER-NO UKD5093 TARIFF: SEWER-RESIDENTIAL			
15/03/18		SEWERAGE 8 - 6 = 2 kl	15.55	2.18	17.73
		TOTAL CURRENT LEVY 148.89			

30 Days	60 Days	90 Days	90+ Days	Total charge (excluding VAT)	Total VAT	Total charge (including VAT)
0.00	0.00	0.00	0.00	-2005.72	16.66	-1989.06

SEE REVERSE SIDE FOR IMPORTANT INFORMATION	Amount in advance	-1989.06	Due date	2015/04/16	Amount payable	-1989.06

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www.ekurhuleni.com

Ekurhuleni
METROPOLITAN MUNICIPALITY

a partnership that works

GERMISTON SERVICE DELIVERY CENTRE
P.O. Box 145
Germiston
1400

Enquiries: 011 - 999 0001
Katlehong: 011 - 999 1318 / 011 - 999 0398
Complaints: 0860 543 000
Fax: 011 - 825 7888

REMITTANCE ADVICE

Vat Reg No. 4280193493

N26 021 00004073

0402 2605633519

EasyPay >>>>>> 9 1339 2605 6335 199

PLEASE ATTACH PERFORATED STUB TO ALL CHEQUE PAYMENTS

Name
L SWARTBOOI

Account number
2605633519

Co. Name	South African Nursing Council	**Co. Address**	PO Box 1123 Arcadia Pretoria 0001	**Payment Dt**	31/12/2014
				Dt Engaged	09/05/2013
Emp Code	345			**Account No**	181760991
Emp Name	MR SL SWARTBOOI			**Branch Code**	051001
Emp Address	21 PHUMULA 144 WILLOW CRES STREET ROODEKOP GERMISTON 1431	**Cost Cent**	PROFFESIONAL PR		
		Department	LEGAL AFFAIRS	**Med Benef.**	03
		Job Title	LEGAL OFFIFER		
		Job Grade	LEVEL 5		

ADDITIONAL INFO		EARNINGS		DEDUCTIONS
ADDITIONAL INFO		Annual Bonus	30793.05	
- CC Provident	2744.03			
- CC Medical	1880.00			
- Bonus	2613.36			
= Cash	30096.38			

YEAR TO DATE TOTALS

Taxable Earnings	329443.16
Taxable Perks	18800.00
Medical Aid	10870.00
Provident Fund	19458.38
Tax Paid	64922.52

CURRENT PERIOD		**Total Earnings**	**30793.05**	**Total Deductions**	**0.00**
Total Perks	1880.00				

NETT PAY **30,793.05**

SoftlineVIP

Companies and Intellectual Property Commission
Republic of South Africa

Form CoR 14.1

Annexure A

- This form is issued in terms of section 13 of the Companies Act, 2008, and Regulation 14 of the Companies Regulation, 2011.
- Annexure A must be completed and attached to the Notice of Incorporation when it is filed.
- A public company, or a state owned company, must have at least 3 initial directors.
- A non-profit company must have at least 3 initial directors.
- A private company, or a personal liability company, must have at least 1 initial director.
- A company is not registered until the Commission has issued a Registration Certificate in Form CoR 14.3

Contacting the Commission

The Companies and Intellectual Property Commission of South Africa

Postal Address
PO Box 429
Pretoria
0001
Republic of South Africa
Tel: 086 100 2472

www.cipc.co.za

Notice of Incorporation
Initial Directors of the Company

The incorporators confirm that each person named below has consented to being appointed in terms of section 66 (7) (b) as a director of the company, whose Memorandum of Incorporation is attached. Au Min Africa Ltd.

Full name / former name, if any: Bongiwe Buyiswa MBINA
Identity number: 840607 0948 089
Nationality: South African
Passport number, if not South African: 4666931063
Date of appointment: March 25, 2015
Designation in the company: CCAO - Chief Compliance & Administrative Officer / Secretary
Residential address: 147 Grosvenor Rd. Comptroller
Bryanston Bryanston, Gauteng 2021
Business address: 3RD Floor Regus House, Fairview Office Park
Postal address: Ring Road, Greenacres, Port Elizabeth 6045
P. O. Box 64015, Greenacres, Port Elizabeth 6057
Occupation: Administrative Officer
South African resident: ✓ (Yes) _____ (No)

AU MIN AFRICA LTD

For Commission Use only	Commission file number:	Date filed:

This form is prescribed by the Minister of Trade and Industry in terms of section 223 of the Companies Act, 2008 (Act No. 71 of 2008).

NOTARY ACKNOWLEDGEMENT CERTIFICATION & AUTHENTICATION

Republic of South Africa S S)

The undersigned certifies that I, **TANDO NGENO** is an independent certified and registered Notary Public of the Republic of the Philippines that on this 15th day of May, 2015 that on behalf of **AU MIN AFRICA LTD** (the "Company") I hereby authenticate and certify that each of the individuals whose name is set forth below currently holds the office as the Active Directors and Officers of the above Company, set forth below presented their individual Identification Numbers appearing opposite their names are their **Certified and Genuine Copy of their Original Passports and Identification Numbers**, were the same persons who executed the documents including this page and acknowledge to me that these same were of their own free and voluntary act and deed.

NAME OFFICER	POSITION	IDENTIFICATION / PASSPORT NUMBER
BONGIWE BUYISWA MBINA	CCAO – Chief Compliance & Administrative Officer/Comptroller/Secretary	840607 0948 087
LITHA SIYABONGA SWARTBOOI	CEO/COO Chief executive Officer / Chief Operating Officer	770311 5852 081

Doc No. _____
Page No. _____
Book No. _____
Series of 2015

NOTARY PUBLIC SEAL SIGNATURE



Corporate Headquarter & Postal Address
3rd Floor, Regus House Fairview Office Park
Ring Road Greenacres, Port Elizabeth
Eastern Cape, South Africa 6045
URL http://www.AuMinerals.biz
[e] Executive@AuMinerals.biz

Main Contact
[t] Toll No.: 001 (888) 785.1113
Fax No. 001 (888) 924-0718
Direct [p + 27 82 09 4988
Bongiwe B Mbina CCAO
direct [e] ccaobongiwe@AuMinerals.biz

BOARD OF DIRECTOR

BONGIWE BUYISWA MBINA

SOUTH AFRICAN PASSPORT
AND
ADDRESS VERIFICATION


REPUBLIC OF
SOUTH AFRICA
PASSPORT
PASSEPORT



In the Name of the President

The President of the Republic of South Africa requests all whom it may concern to allow the bearer of this passport to pass freely without let or hindrance and to afford the bearer all necessary assistance and protection.

Au Nom du Président

Le Président de la République d'Afrique du Sud, prie tous ceux que les présentes peuvent concerner de laisser passer librement et sans entrave le titulaire du présent passeport et de lui accorder toute aide et secours en cas de besoin.

CONDITIONS OF ISSUE AND INFORMATION FOR TRAVELLERS ON PAGE 30

BI-110

32

THE BEARER MUST COMPLETE THE PARTICULARS BELOW:
LE TITULAIRE EST PRIE DE COMPLETER LES DETAILS CI-DESSOUS:

Bearer's place of permanent residence:
Résidence principale du titulaire:

Street — Rue	Lonehill Blaboskrand
Place — Lieu	Crestwoodhills
Country — Pays	South Africa
Telephone — Téléphone	082 709 4988

In case of accident or death notify:
En cas d'accident ou de décès, prière d'aviser:

Name — Nom	Marion Mbina
Relationship — A titre de	Aunt
Street — Rue	Crosvenor
Place — Lieu	Bmenston
Country — Pays	South Africa
Telephone — Téléphone	083 220 1087

Signature of bearer — Signature du titulaire

R.

REPUBLIC OF SOUTH AFRICA REPUBLIQUE D'AFRIQUE DU SUD

PASSPORT PASSEPORT



PASSPORT No - No DU PASSEPORT 466931063

TYPE - TYPE: PP
COUNTRY - PAYS: ZAF
SURNAME - NOM: MBINA
GIVEN NAMES - PRENOMS: BONGIWE BUYISWA
NATIONALITY - NATIONALITE: SOUTH AFRICAN / SUD-AFRICAINE
DATE OF BIRTH - DATE DE NAISSANCE: 07 06 1984
IDENTITY No - No D'IDENTITE: 8406070948089
SEX - SEXE: F
PLACE OF BIRTH - LIEU DE NAISSANCE: SOUTH AFRICA
DATE OF ISSUE - DATE DE DELIVRANCE: 26 03 2007
AUTHORITY - AUTORITE: DEPT OF HOME AFFAIRS
DATE OF EXPIRY - DATE D'EXPIRATION: 25 03 2017

PPZAFMBINA<<BONGIWE<BUYISWA<<<<<<<<<<<<<<<<<<
4669310636ZAF8406077F17032508406070948089<56

24hr Client Care Centre 0860 10 20 43 E clientcare@capitecbank.co.za
capitecbank.co.za

One of the Global One money management products or services

Savings Account Statement

CAPITEC BANK

Simplicity is the ultimate sophistication

Tax Invoice

From Date: 06/04/2015
To Date: 07/05/2015
Print Date: 07/05/2015

Capitec Bank Limited
1 Quantum Road
Techno Park
Stellenbosch 7600

CAPITEC BANK
47 00 10
07 MAY 2015
Teller 1
4047

SAVINGS ACCOUNT: Savings Account

Personal Details
Miss Bongiwe Buyiswa Mbina
238 Bridgetown Complex
Bloubosbrand
Johannesburg - 2194

Account Number: 1257930921

Card Number: 5284972210015240

Companies and Intellectual Property Commission
Republic of South Africa

Form CoR 14.1

Annexure A

- This form is issued in terms of section 13 of the Companies Act, 2008, and Regulation 14 of the Companies Regulation, 2011.
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Contacting the Commission

The Companies and Intellectual Property Commission of South Africa

Postal Address
PO Box 429
Pretoria
0001
Republic of South Africa
Tel: 086 100 2472

www.cipc.co.za

Notice of Incorporation
Initial Directors of the Company

The incorporators confirm that each person named below has consented to being appointed in terms of section 66 (7) (b) as a director of the company, whose Memorandum of Incorporation is attached. AU MIN Africa Ltd.

Full name / former name, if any: Anthony Persia Galvan

Identity number: EC 29386787

Nationality: Filipino

Passport number, if not South African: EC 29386787

Date of appointment: Jan. 2014

Designation in the company: CFO, Chief Financial Officer/Treasurer

Residential address: Jose Panganiban Camarines Norte Republic of the Philippines

Business address: 3RD Floor, Regis House, Fairview Office Park, Ring Road Greenacres Port Elizabeth 6045

Postal address: P.O. Box 64015, Greenacres, Port Elizabeth 6057

Occupation: Chief financial officer / Consultant

South African resident: _____ (Yes) ✓ (No) Filipino

AU MIN AFRICA LTD

For Commission Use only	Commission file number:	Date filed:

This form is prescribed by the Minister of Trade and Industry in terms of section 223 of the Companies Act, 2008 (Act No. 71 of 2008).

NOTARY ACKNOWLEDGEMENT
CERTIFICATION & AUTHENTICATION

Republic of the Philippines SS)
Mindanao Island

The undersigned certifies that I, **BUENAVENTURA SAGRADO** is an independent certified and registered Notary Public of the Republic of the Philippines that on this 13th day of May, 2015 that on behalf of **AU MIN AFRICA LTD** (the "Company") I hereby authenticate and certify that each of the individuals whose name is set forth below currently holds the office as the Active Directors and Officers of the above Company, set forth below presented their individual Identification Numbers appearing opposite their names are their **Certified and Genuine Copy of their Original Passports and Identification Numbers**, were the same persons who executed the documents including this page and acknowledge to me that these same were of their own free and voluntary act and deed.

NAME OFFICER	POSITION	IDENTIFICATION / PASSPORT NUMBER
Ariel Rigon Caleon	Chairman / Director	EB0466049
Anthony Persia Galvan	CFO/Secretary/Treasurer/Director	EC29386787

Doc No. 111
Page No. 23
Book No. 98
Series of 2015

NOTARY PUBLIC SEAL SIGNATURE

Corporate Headquarter & Postal Address
3rd Floor, Regus House Fairview Office Park
Ring Road Greenacres, Port Elizabeth
Eastern Cape, South Africa 6045
URL:http://www.AuMinerals.biz
[e] Executive@AuMinerals.biz

Main Contact
[t] Toll No.: 001 (888) 785.1113
Fax No. 001 (888) 924-6718
Direct [p +27 82 09 4988
Bongiwe B Mbina CCAO
direct [e] ccaobongiwe@AuMinerals.biz

BOARD OF DIRECTOR

ANTHONY PERSIA GALVAN

REPUBLIC OF THE PHILIPPINES PASSPORT
AND
ADDRESS VERIFICATION

PILIPINAS



PASAPORTE

MGA PAGTATAKDA - LIMITATIONS

3

REPUBLIKA NG PILIPINAS / REPUBLIC OF THE PHILIPPINES

PASAPORTE
PASSPORT

P

PHL

XX5011086

Apelyido/Surname
GALVAN

Pangalan/Given names
ANTHONY

Panggitnang apelyido/Middle name
PERSIA

Araw ng kapanganakan/Date of birth
03 May 1971

Kasarian/Sex
M

Pook ng kapanganakan/Place of birth
JP CAM NO

Nasyonalidad/Nationality
FILIPINO

Araw ng pagkakaloob/Date of issue
20 Nov 2009

Maykapangyarihang magkaloob/Issuing Authority
DEPARTMENT OF FOREIGN AFFAIRS
MANILA

Araw ng pagkawalang bisa/Valid until
19 Nov 2014

REPUBLIC OF THE PHILIPPINES

P<PHLGALVAN<<ANTHONY<<<<<<<<<<<<<<<<<<<<<<

XX5011086<PHL7105030M1411199<<<<<<<<<<<<<<06

Companies and Intellectual Property Commission
Republic of South Africa

Form CoR 14.1

Annexure A

- This form is issued in terms of section 13 of the Companies Act, 2008, and Regulation 14 of the Companies Regulation, 2011.
- Annexure A must be completed and attached to the Notice of Incorporation when it is filed.
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- A non-profit company must have at least 3 initial directors.
- A private company, or a personal liability company, must have at least 1 initial director.
- A company is not registered until the Commission has issued a Registration Certificate in Form CoR 14.3

Notice of Incorporation
Initial Directors of the Company

The incorporators confirm that each person named below has consented to being appointed in terms of section 66 (7) (b) as a director of the company, whose Memorandum of Incorporation is attached. AU MIN Africa Ltd.

Full name / former name, if any: Ariel Rigon CHLEON

Identity number: EB0466049

Nationality: Filipino

Passport number, if not South African: EB0466049

Date of appointment: Jan. 2014

Designation in the company: CHAIRMAN

Residential address: LAPOO, DAET, Camarines Norte, Republic of the Philippines

Business address: 3RD Floor. Regus House, Fairview office Park, Greenacres, Ring Road. Port Elizabeth 6045

Postal address: P.O. Box 64015, Greenacres, Port Elizabeth 6257

Occupation: Atty. Legal Counsel Consultant

South African ~~resident~~: ____ (Yes) ✓ (No) Filipino

AU MIN AFRICA LTD

For Commission Use only	Commission file number:	Date filed:

Contacting the Commission

The Companies and Intellectual Property Commission of South Africa

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www.cipc.co.za

This form is prescribed by the Minister of Trade and Industry in terms of section 223 of the Companies Act, 2008 (Act No. 71 of 2008).

NOTARY ACKNOWLEDGEMENT CERTIFICATION & AUTHENTICATION

Republic of the Philippines S S)
Mindanao Island

The undersigned certifies that I, **BUENAVENTURA SAGRADO** is an independent certified and registered Notary Public of the Republic of the Philippines that on this 13th day of May, 2015 that on behalf of **AU MIN AFRICA LTD** (the "Company") I hereby authenticate and certify that each of the individuals whose name is set forth below currently holds the office as the Active Directors and Officers of the above Company, set forth below presented their individual Identification Numbers appearing opposite their names are their **Certified and Genuine Copy of their Original Passports and Identification Numbers**, were the same persons who executed the documents including this page and acknowledge to me that these same were of their own free and voluntary act and deed.

NAME OFFICER	POSITION	IDENTIFICATION / PASSPORT NUMBER
Ariel Rigon Caleon	Chairman / Director	EB0466049
Anthony Persia Galvan	CFO/Secretary/Treasurer/Director	EC29386787

Doc No. 111
Page No. 23
Book No. 98
Series of 2015

NOTARY PUBLIC SEAL SIGNATURE

Corporate Headquarter & Postal Address
3rd Floor, Regus House Fairview Office Park
Ring Road Greenacres, Port Elizabeth
Eastern Cape, South Africa 6045
URL:http://www.AuMinerals.biz
[e] Executive@AuMinerals.biz

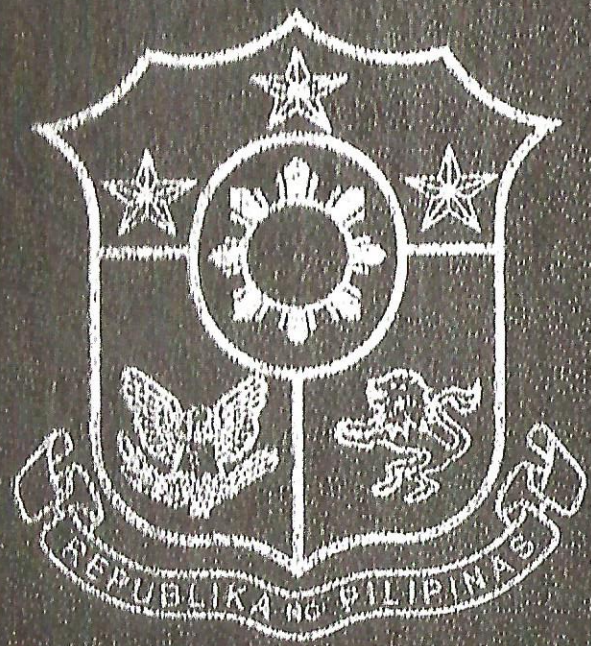
Main Contact
[t] Toll No.: 001 (888) 785.1113
Fax No. 001 (888) 924-0718
Direct [p + 27 82 09 4988
Bongiwe B Mbina CCAO
direct [e] ccaobongiwe@AuMinerals.biz

BOARD OF DIRECTOR

ARIEL RIGON CALEON

REPUBLIC OF THE PHILIPPINES PASSPORT
AND
ADDRESS VERIFICATION

PILIPINAS



PASAPORTE

MGA PAGTATAKDA-LIMITATIONS

Not valid for Travel to Iraq

غير صالح للسفر إلى العراق

3

REPUBLIKA NG PILIPINAS / REPUBLIC OF THE PHILIPPINES

PASAPORTE
PASSPORT



URI/ Type
P

Kodigo ng bansa/ Country code
PHL

Pasaporte blg / Passport no
EB0466049

Apelyido / *Surname*
CALEON

Pangalan / *Given names*
ARIEL

Panggitnang apelyido / *Middle name*
RIGON

Araw ng kapanganakan / *Date of birth*
20 Jan 66

Nasyonalidad / *Nationality*
FILIPINO

Kasarian / *Sex*
M

Pook ng kapanganakan / *Place of birth*
LABO CAM NO

Araw ng pagkakaloob / *Date of issue*
25 Jun 10

Maykapangyarihang magkaloob / *Issuing authority*
DFA LEGAZPI

Araw ng pagkawalang bisa / *Valid until*
24 Jun 15

Lagda ng pinagkalooban / *Holder's signature*

P<PHLCALEON<<ARIEL<<<<<<<<<<<<<<<<<<<<<<<<<<

EB0466049<PHL6601203M1506244<<<<<<<<<<<<<<02

NES

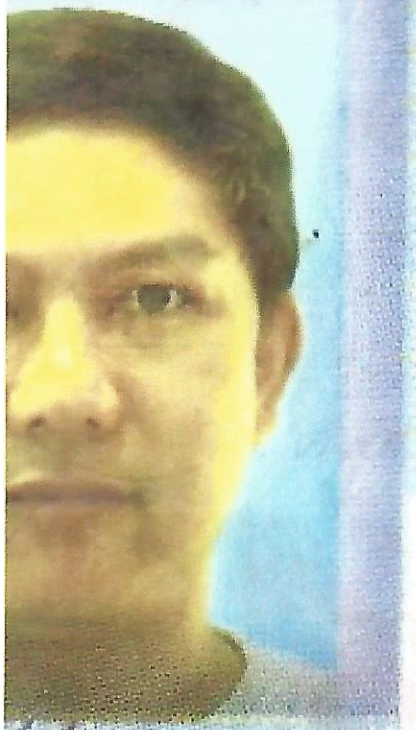
IUM

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF TRANSPORTATION & COMMUNICATIONS
LAND TRANSPORTATION OFFICE
EAST AVE QUEZON CITY

PROFESSIONAL

,FIRST NAME,MIDDLE NAME

ON, ARIEL RIGON



OF LICENSEE

ADDRESS (NO. STREET, CITY MUN., PROVINCE)

NATIONAL ROAD LABO CAMARINES NORTE

BIRTH DATE	SEX	HT. (cm)	WT. (kg)	NATIONA
1966-01-20	M	175	68	FIL

RESTRICTIONS	CONDITIONS	AGY	EXPIRES
12		E01	2016-01-

LICENSE NO.

E01-95-017429

VIRGINIA P. TOR
ASST. SECRETA