



Ministry of Commerce, Industry, and Labour  
Matagaluega o Pisinisi, Alamanuia ma Leipa

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[inclusive of Registries of Companies and Intellectual Property]

**Form 6**  
**Notice of change of registered office or postal address**  
*Section 18, Companies Act 2001*

Company name

Company number

Address of new  
registered office  
*[if applicable]*

The change in the registered office of the company takes effect on

Day

Month

Year

Address of new  
Postal address  
*[if applicable]*

The change in the postal address of the company takes effect on

Day

Month

Year

**Important information**

- A company must have a registered office and a postal address in Samoa.
- The postal address may be the company's registered office or another place, including a PO Box or private bag.

**Form 6 - continued**

- The registered office may be at the company's place of business or another place, but it must not be a PO Box or private bag.
- If the registered office or the postal address is at the offices of any firm of chartered accountants, barristers and solicitor, or any other person, you must state that the company's registered office or its postal address is at the offices of that firm or person and also state the particulars of the location in any building of those offices.
- If the registered office or postal address is not at the offices of any such firm or person but is located in a building occupied by persons other than the company, you must state the particulars of its location in the building.

Note: The change in registered office or the change in postal address takes effect on the later of—

- the date that is 5 working days after the notice is received by the Registrar; or
- any date specified in the notice as the date on which the change is to be effective.

**Postal address to which communications from the Registrar may be sent**

**Email** *[optional]*

Signature of director/  
Authorized person: .....

Date:  
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Full legal name of director/  
authorised person: .....

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Completed by

Address

Email\*  
*\*Optional*

Telephone

Facsimile\*  
*\*Optional*

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