EQUITY Equity Financial Trust Company

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# REMOVAL REQUEST
# CANADA TO AUSTRALIA

Sequence No
(For internal use only)

CDN

*(Please complete in Block Capitals)*

| | |
|---|---|
| **NAME OF ISSUING COMPANY** | **LACHLAN STAR LIMITED** |
| **NO OF SECURITIES** | |
| **FULL NAME OF SHAREHOLDER(S)** | |
| | |
| **REGISTERED ADDRESS** | |
| | |
| | |

**ARE SHARES HELD AT CDS?** (Tick one box **ONLY**):

☐ **YES** **CDS WITHDRAWAL REFERENCE ID:** _____

☐ **NO** **CERTIFICATE NUMBER(S) SUBMITTED** _____

Canadian Custodian / Broker Firm Name: _____

Contact Name: _____ Telephone Number: _____

E-mail: _____ Authorized Signature or Broker Stamp: _____

**SHAREHOLDER INSTRUCTIONS** (Tick one box **ONLY**):

☐ **Issue Securities onto the Issuer Sponsored Sub Register**

An Issuer Sponsored Statement will be issued and can only be mailed to the registered address.

**OR**

☐ **Deposit into Chess** **CHESS HIN** _____

Participant Name _____

Please note that an issuer sponsored statement will be issued if CHESS details are incorrect.

**Signature of Shareholder(s):** All holders must sign

_____ _____ _____

Signature Signature Date

***NOTE:***

***YOU MUST FULLY COMPLETE EACH RELEVANT SECTION TO ENSURE THERE ARE NO PROCESSING DELAYS. ORIGINAL REMOVAL REQUEST FORMS ARE REQUIRED, COPIES CAN BE FAXED TO 416-361-0470 OR EMAILED TO CROSSBORDER@EQUITYFINANCIALTRUST.COM. FOR INQUIRIES, PLEASE CONTACT US BY PHONE AT 416-361-0152 OR BY EMAIL AT CROSSBORDER@EQUITYFINANCIALTRUST.COM.***