

AFRICAN REGIONAL INDUSTRIAL PROPERTY ORGANIZATION (ARIPO)

Form M 2
Appointment of the representative

For Official Use

Received on:

To: The Director General,
ARIPO Office,
P.O. Box 4228,
Harare, Zimbabwe.

Applicant's or Representative's File
Reference:

POWER OF ATTORNEY

I/We, the undersigned,

Name:.....

Address:

hereby appoint

Name: FISHER, CORMACK & BOTHA.....

Address: P.O. Box 74, Blantyre, Malawi.....

Telephone Number +265 620 964 Telefacsimile Number(s) +265 624 105.....

to act as my/our representative in all proceedings relating to:

- all existing and future applications and/or registrations of the applicant subject to any exception indicated on an additional sheet.
- the following application(s) and/or registration(s):
.....
- the application(s) concerning the following mark(s):
.....
- the application(s) having the following application number(s) as well as any registration(s) resulting therefrom:
.....
- Other (specify)

and ratify all acts done by the representative on my/our behalf in connection with that (those) matter(s), and request that all notices, requisitions and communications relating thereto be sent to the said representative at his address

Any previous appointment in respect of the same matter(s) is hereby revoked.

SIGNATURE(S)

.....
(Date)