

88(2) Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

4191186

Company name in full	COZE.com LIMITED		
Shares allotted (including bor	nus shares):	— 	
	From	То	
Date or period during which	Day Month Year Day M	Ionth Year	
shares were allotted (If shares were allotted on one date enter that date in the "from" box)	110192003		
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	us\$875,000		
Nominal value of each share	us\$1.00		
Amount (if any) paid or due on eac share (including any share premium)	ch us \$ 1.00		
List the names and addresses of th	he allottees and the number of shares allotted to each	overleaf	
If the allotted shares are fully	or partly paid up otherwise than in cash plea	ise state:	
% that each share is to be treated as paid up			
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)			
	When you have completed and signed the the Registrar of Companies at:		
	Companies House, Crown Way, Cardiff CF14 3U	Z DX 33050 Car	

A16 COMPANIES HOUSE

For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh

Shareholder details		Shares and share	Shares and share class allotted	
Name COZe.com,LLC		Class of shares allotted	Number allotted	
Address 135 EAST 57th STREE	T NEW YORK	ORDINARY	1.04075000	
NY 10022	· NEW TORK	DROIDARY	45\$875,000	
	tcode LLLLL			
Name		Class of shares	Number	
		aliotted	allotted	
Address		}		
			<u> </u>	
UK Pos	tcode			
Name		Class of shares allotted	Number allotted	
Address				
UK Pos	stcode	L		
Name		Class of shares allotted	Number allotted	
Address				
UK Pos	stcode LLLLLL			
Name		Class of shares allotted	Number allotted	
Address				
(· · · · · · · ·	
UK Pos	stcode בבבב		· · · · · · · · · · · · · · · · · · ·	
Please enter the number of continuar Signed A director / secretary / administrator / adm	tion sheets (if any) attached to t	Date _// SEPT 2	delete as appropriate	
Please give the name, address,				
telephone number and, if available, a DX number and Exchange of the				
person Companies House should contact if there is any query.		Tel		
, , , ,	DX number	DX exchange		