	Date:				
			Address		
To Zota Health Care ZOTA HOUSE, 2/S Sagrampura, Sur Gujarat	896 Hira Modi Stre	et,			
Dear Sir,		Sub-leave of D	unlicata Shava Car	tificata	
		Sub: Issue of Du	iplicate Share Cer	tificate	
number				equity	share unde folio
	Distinctive Nos.		Certificate Nos.		
Folio No.	From	To		To	No. of Shares
	FIOIII	10	From	10	
That the share certificate(s)					
Kindly do the needful as earliest as possible.					
Thanking you,					
Yours faithfully,					
(Signature of Sha	areholders)				
Encl.: as above					

Note: After filling this form forward this form along with necessary paper to Satellite Corporate Service Pvt. Ltd. Register & Transfer Agent (RTA) of the Company.