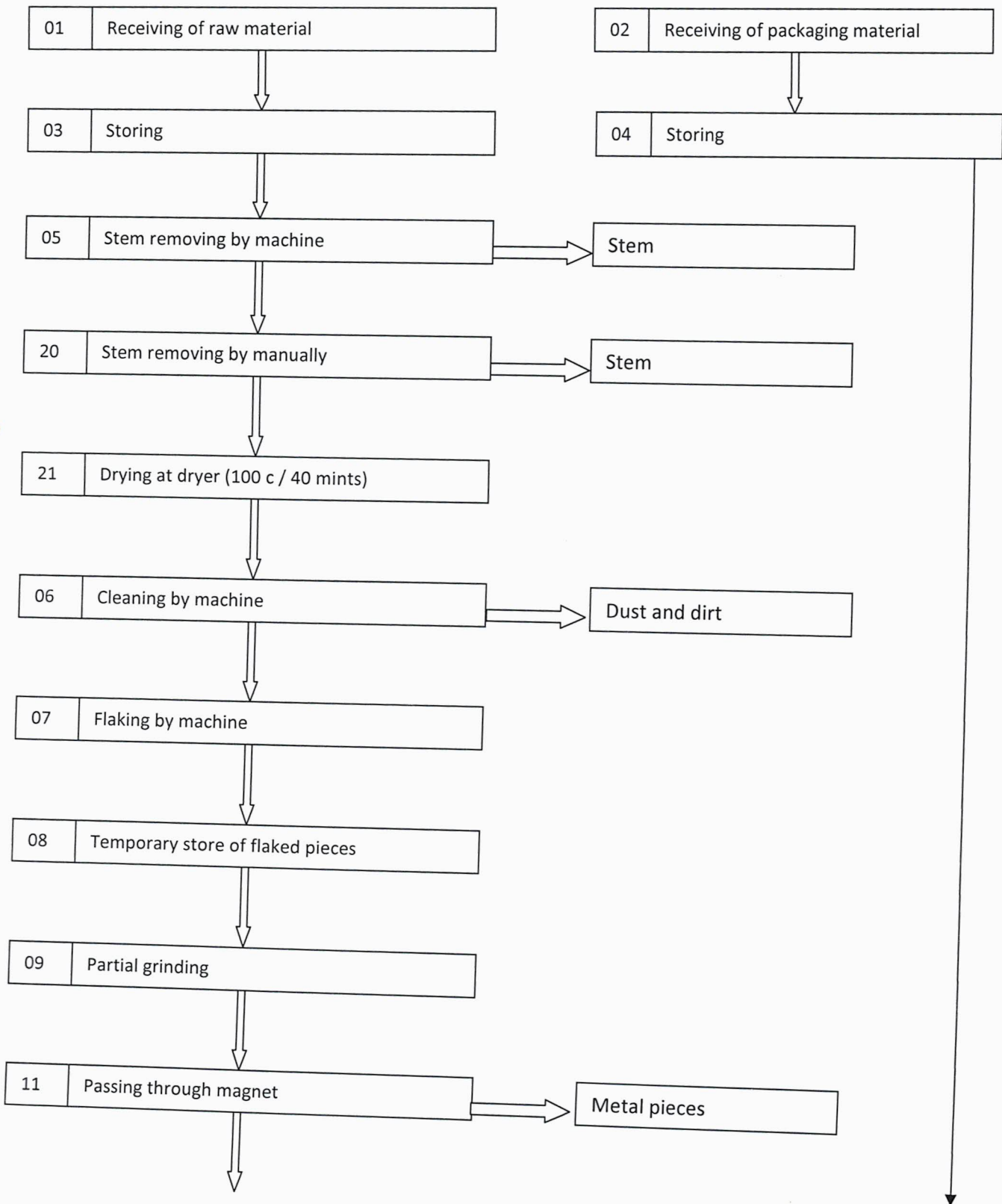


Flow Diagram for Chilli Flakes (Chillico Foods and Jinna)

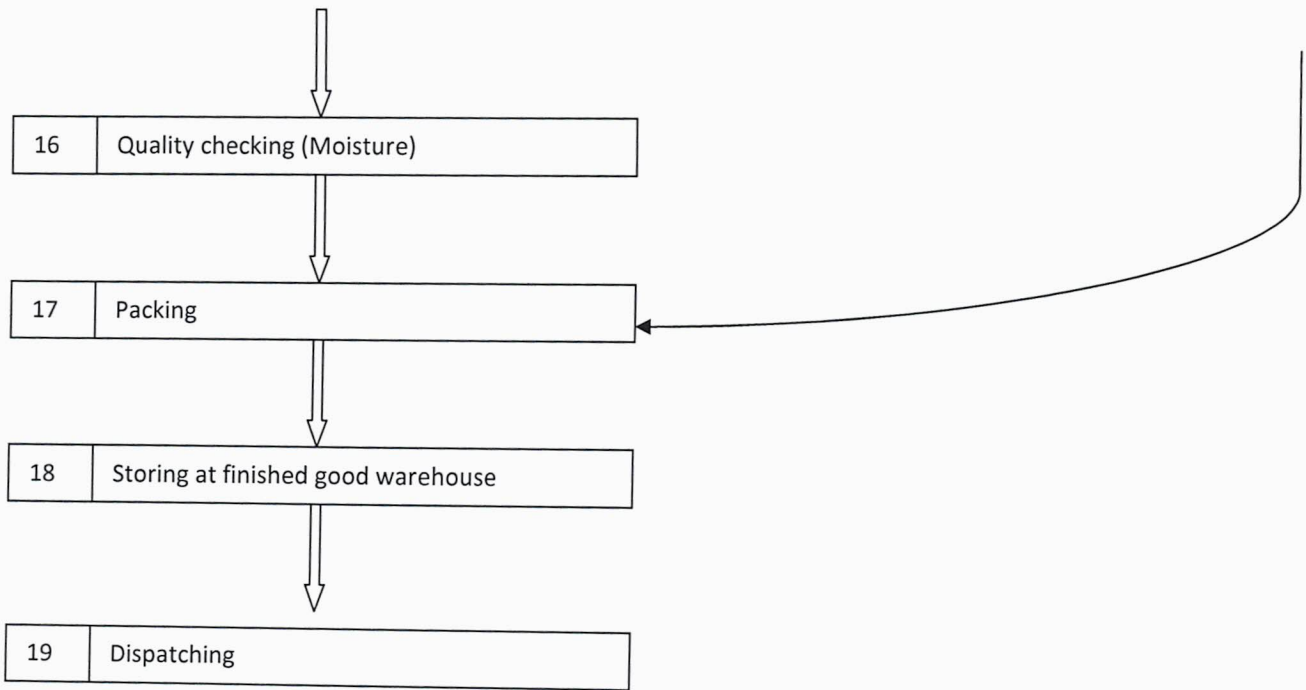
CF/FD/02



Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

Flow Diagram for Chilli Flakes (Chillico Foods and Jinna)

CF/FD/02



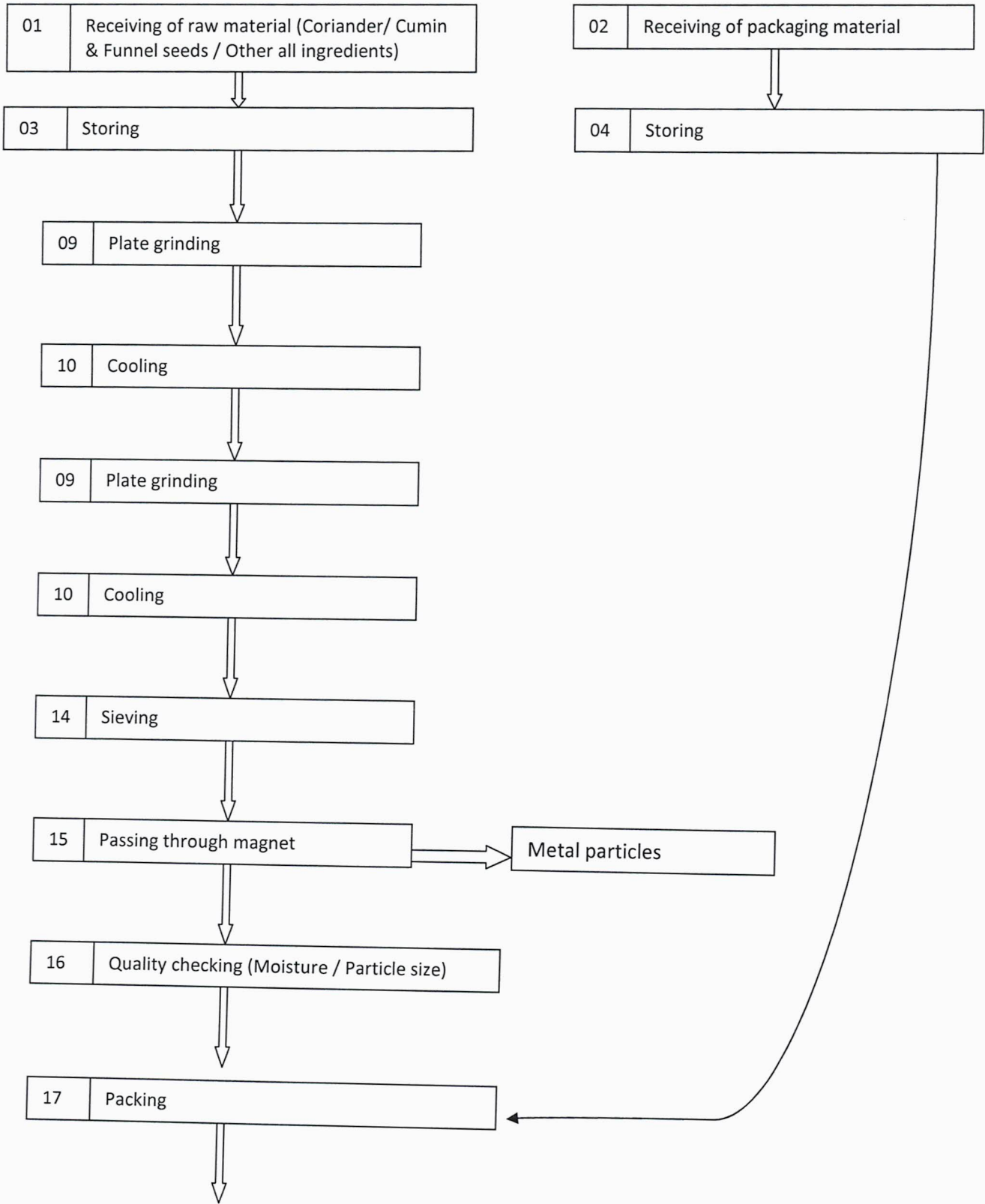
Step number 5 and 20 are excluded for Jinnah products

On site Verification by FSTL on behalf of FST: Date:.....

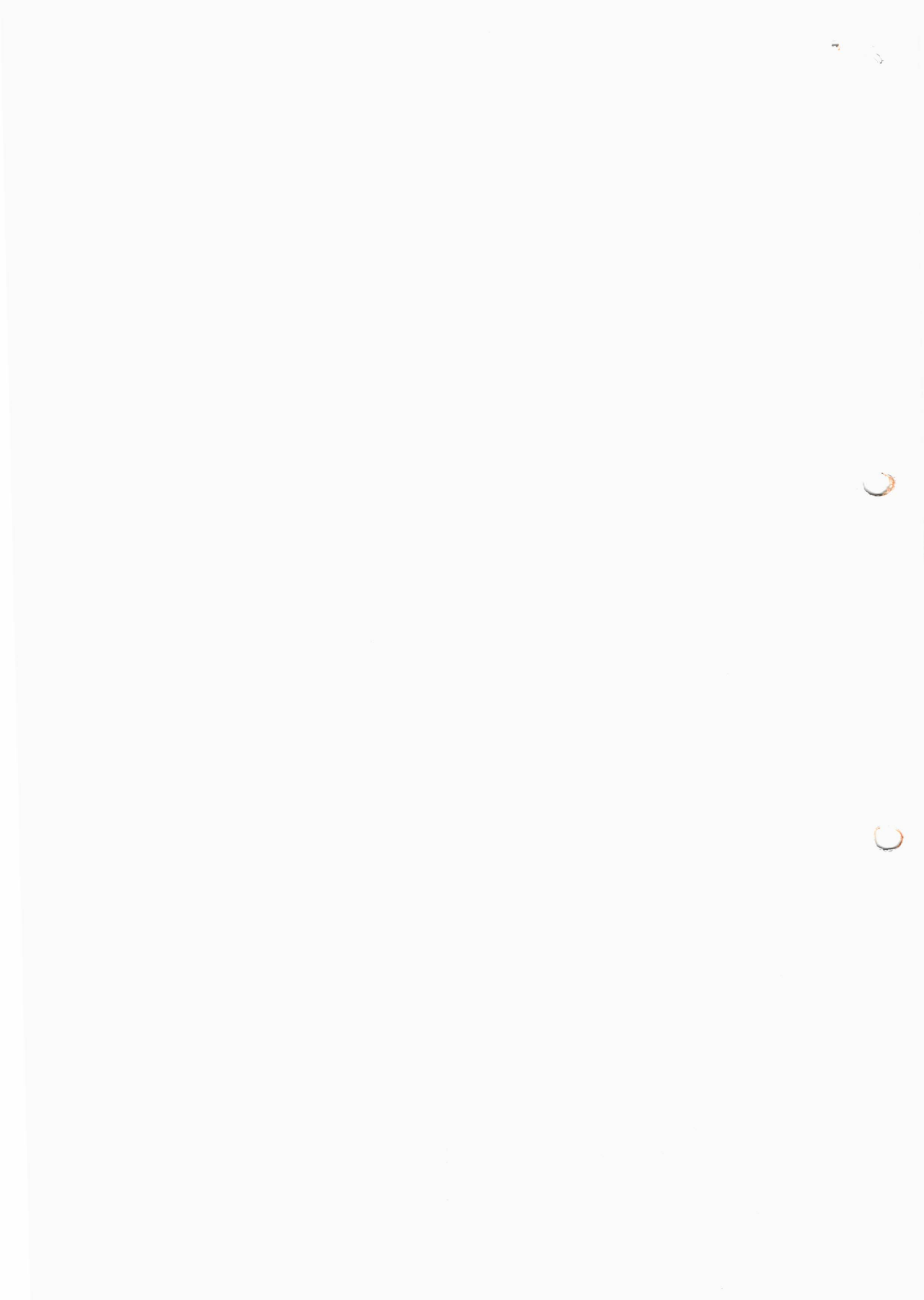
Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

Flow Diagram for Turmeric

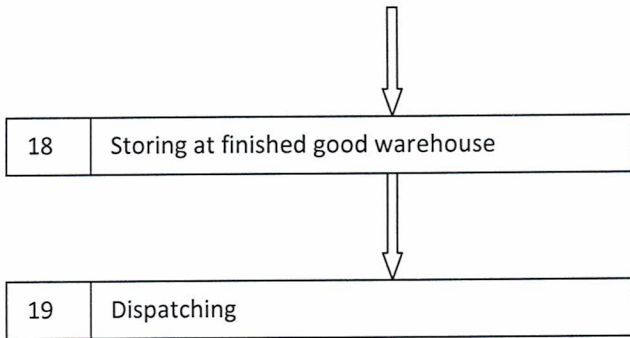
CF/FD/05



Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD



	CHILLICO FOODS (PVT) LTD	Page 2 of 2
	Flow Diagram for Turmeric	CF/FD/05

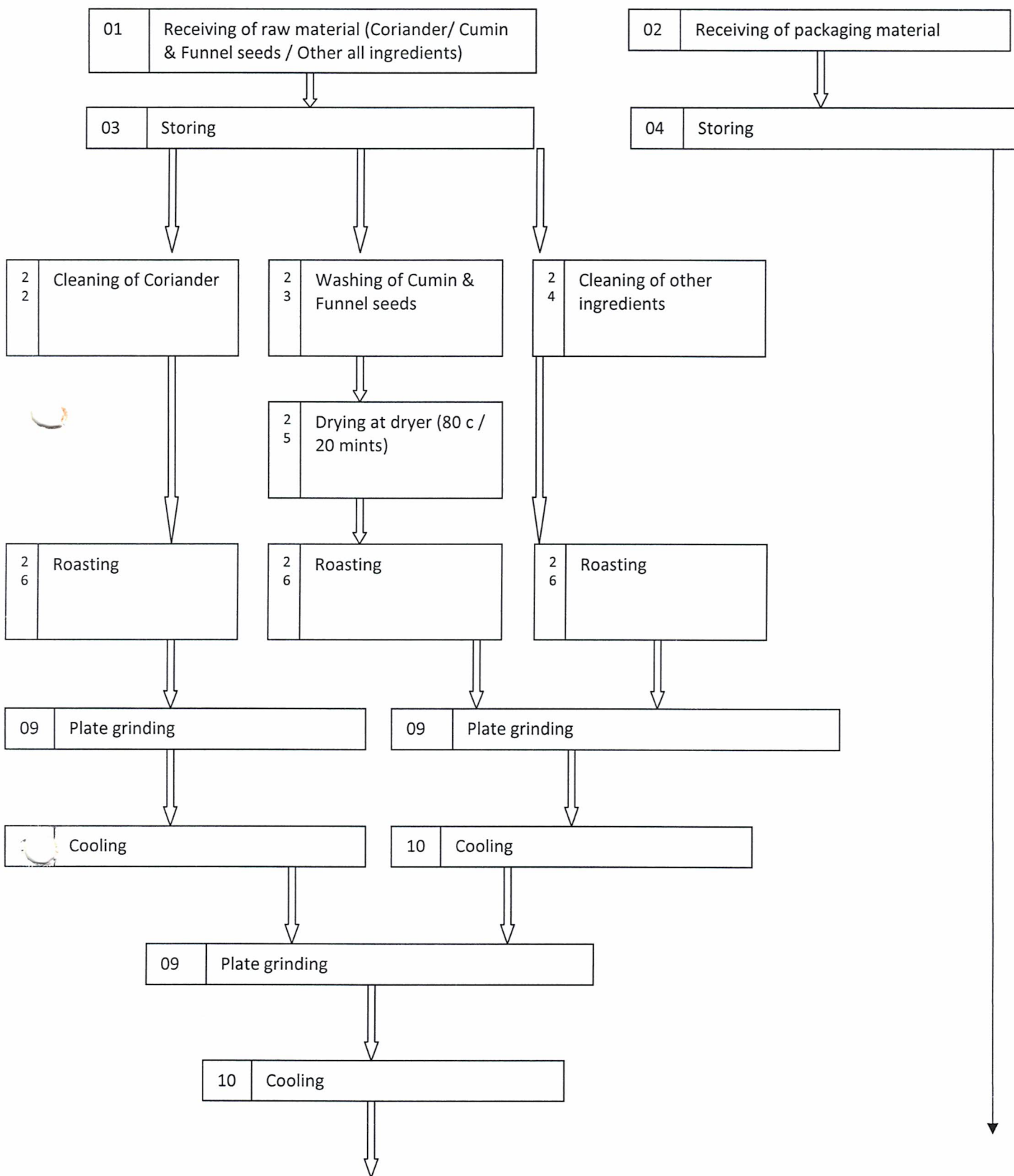


On site Verification by FSTL on behalf of FST: Date:.....

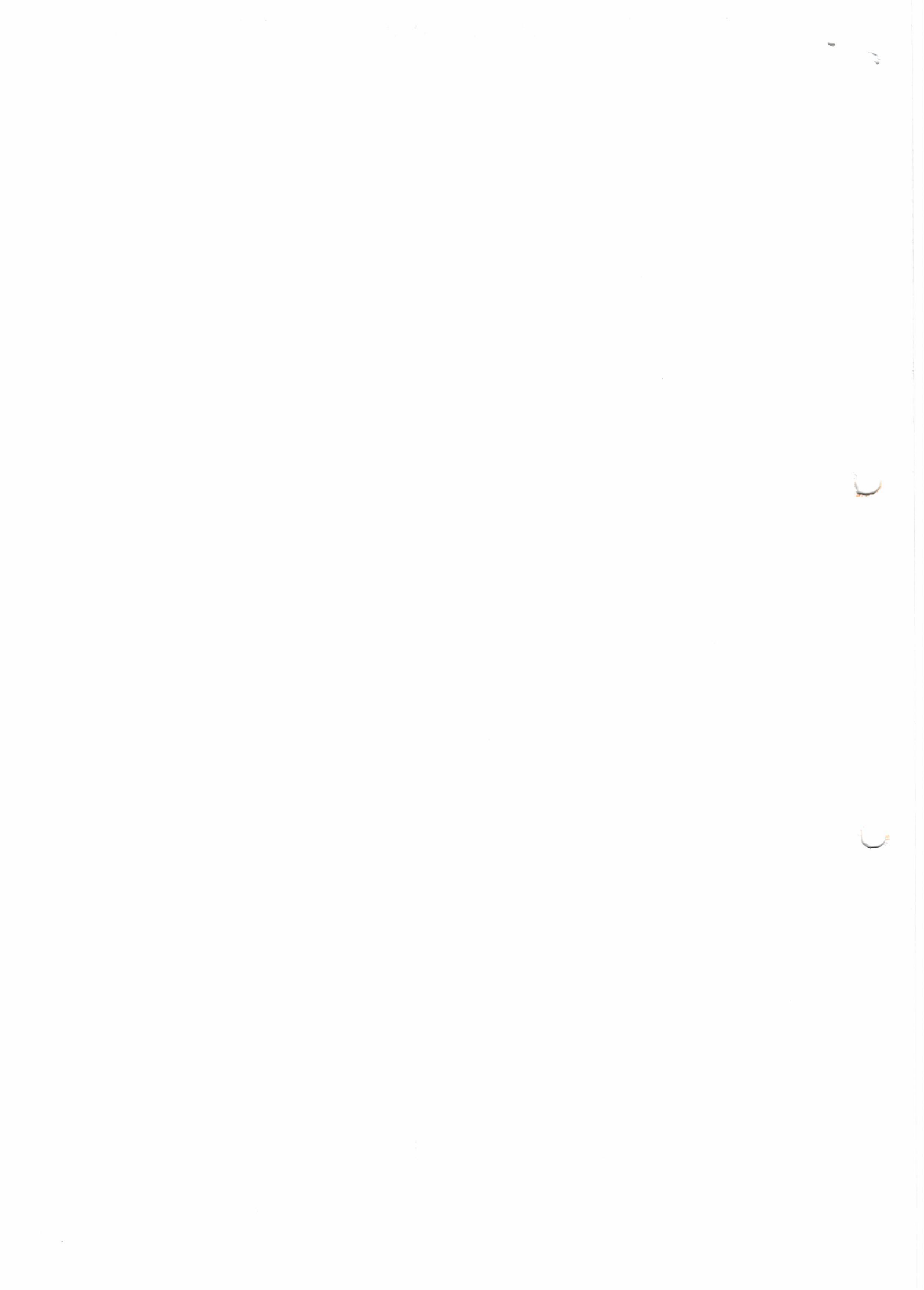
Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

Flow Diagram for Chilli Powder (Chillico Foods and Jinna)

CF/FD/03

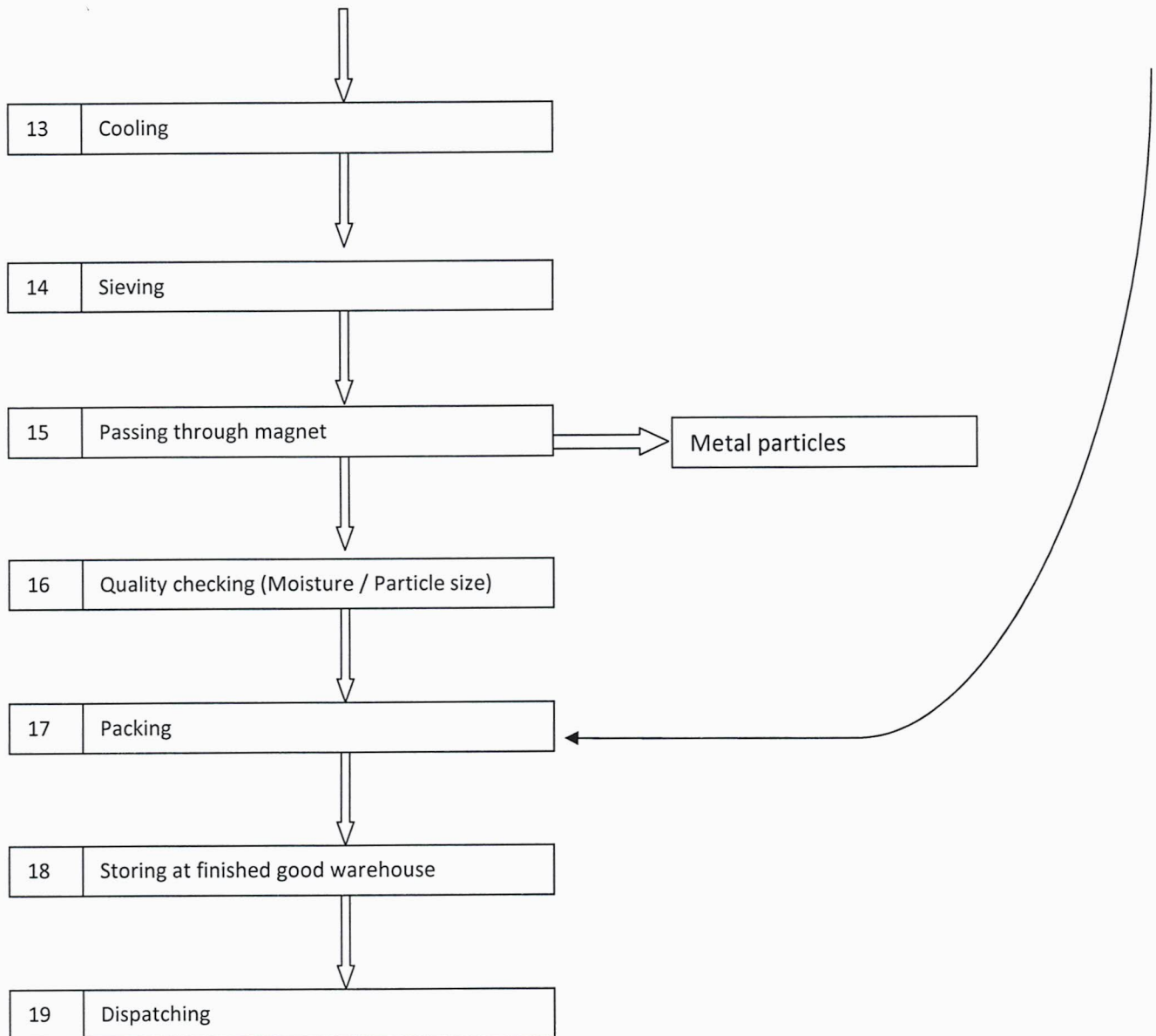


Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD



Flow Diagram for Chilli Powder (Chillico Foods and Jinna)

CF/FD/03



Step number 26 is excluded for normal curry powder and step number 26 is included only roasted curry powder

On site Verification by FSTL on behalf of FST: Date:.....

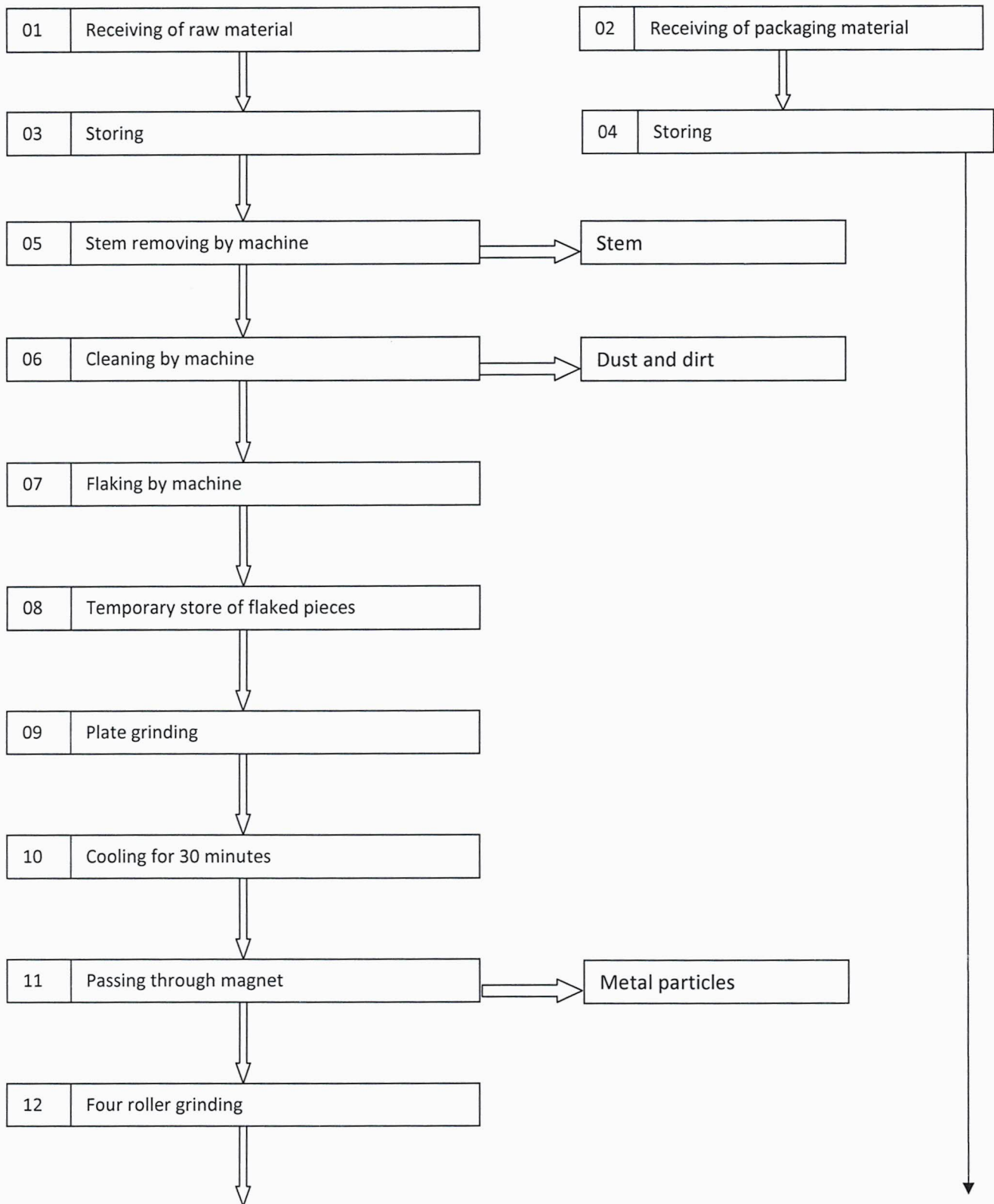
Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

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Flow Diagram for Chilli Powder (Chillico Foods and Jinna)

CF/FD/01



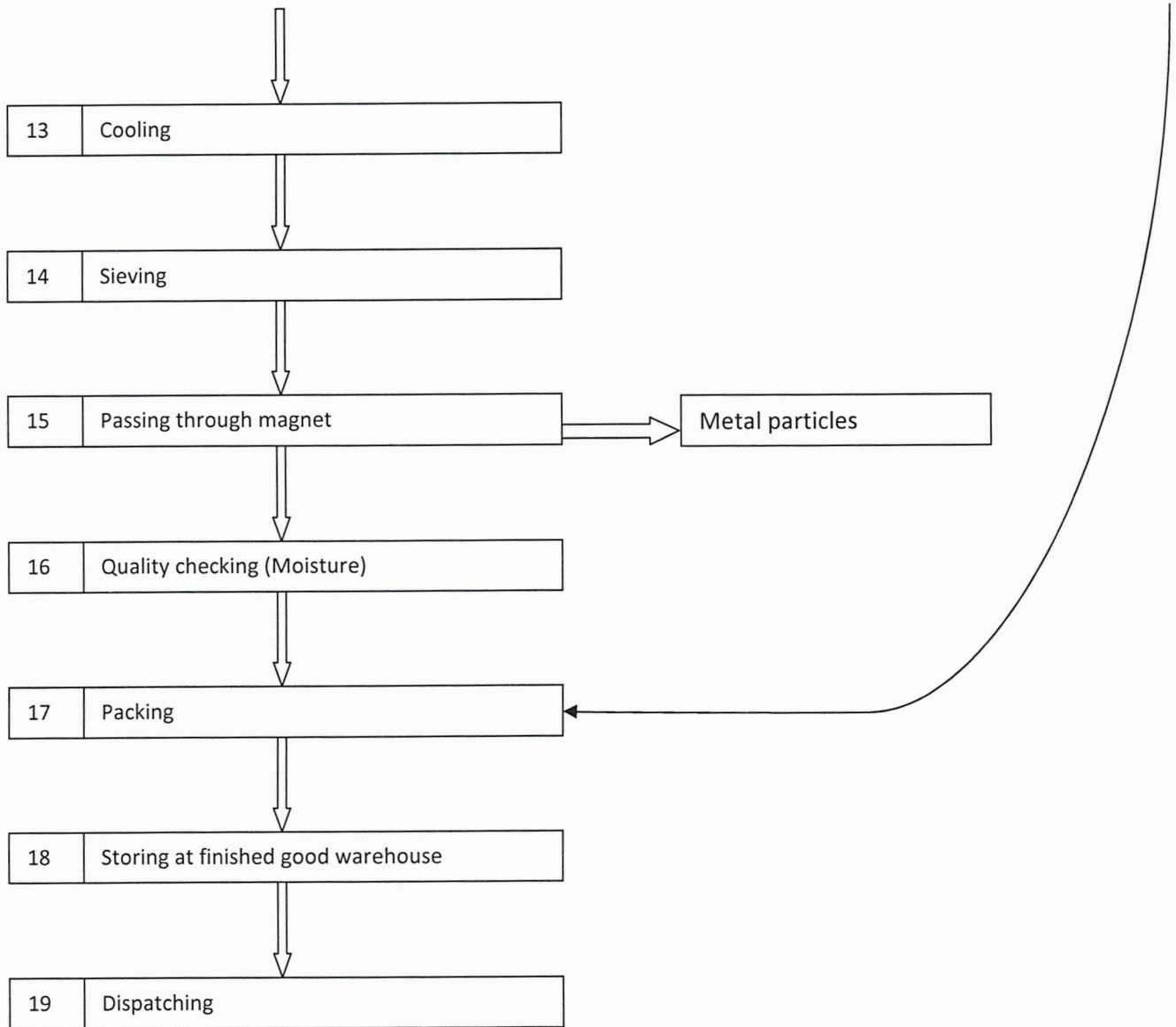
Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

1



Flow Diagram for Chilli Powder (Chillico Foods and Jinna)

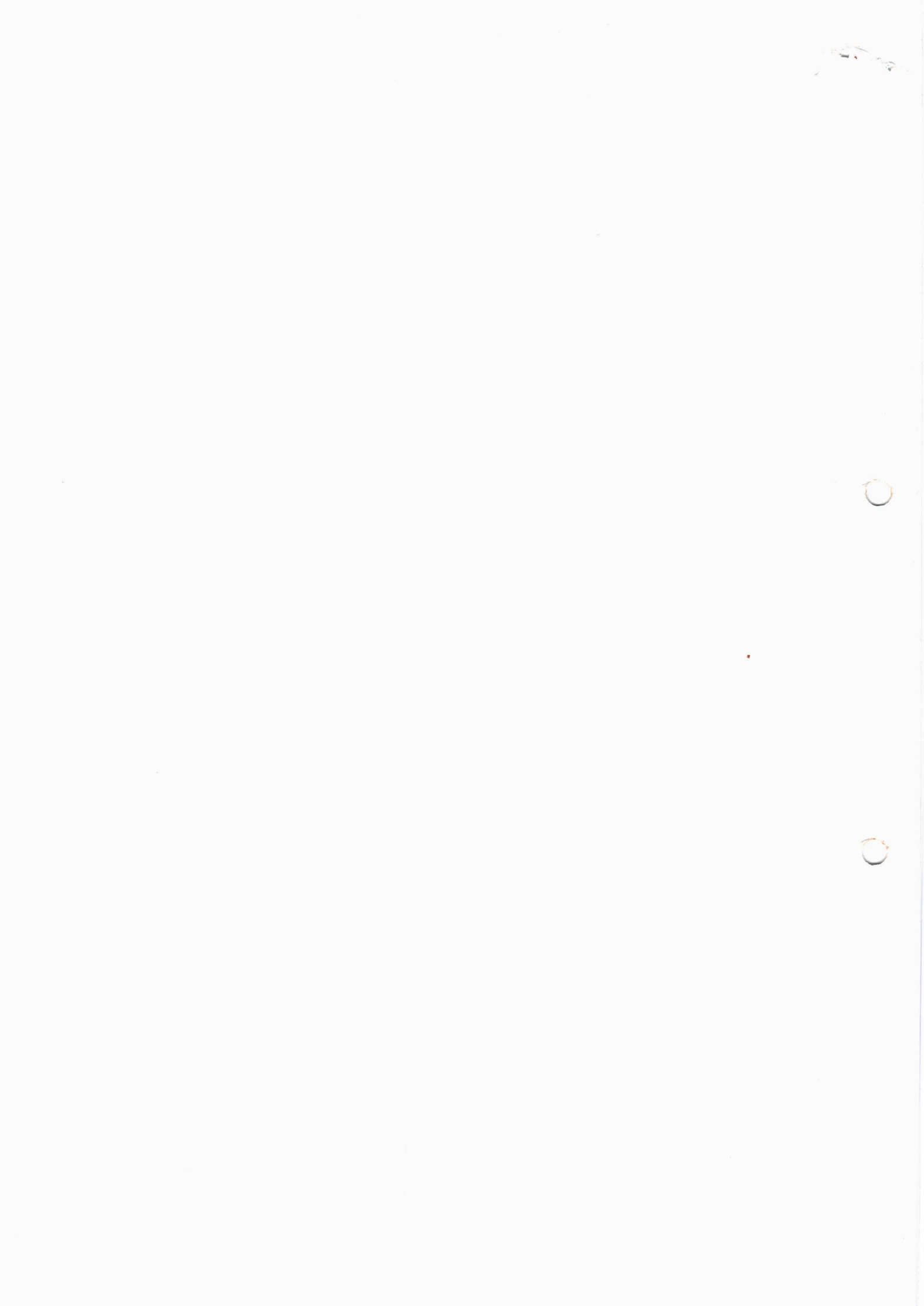
CF/FD/01



Step number 5 and 14 are excluded for Jinnah products

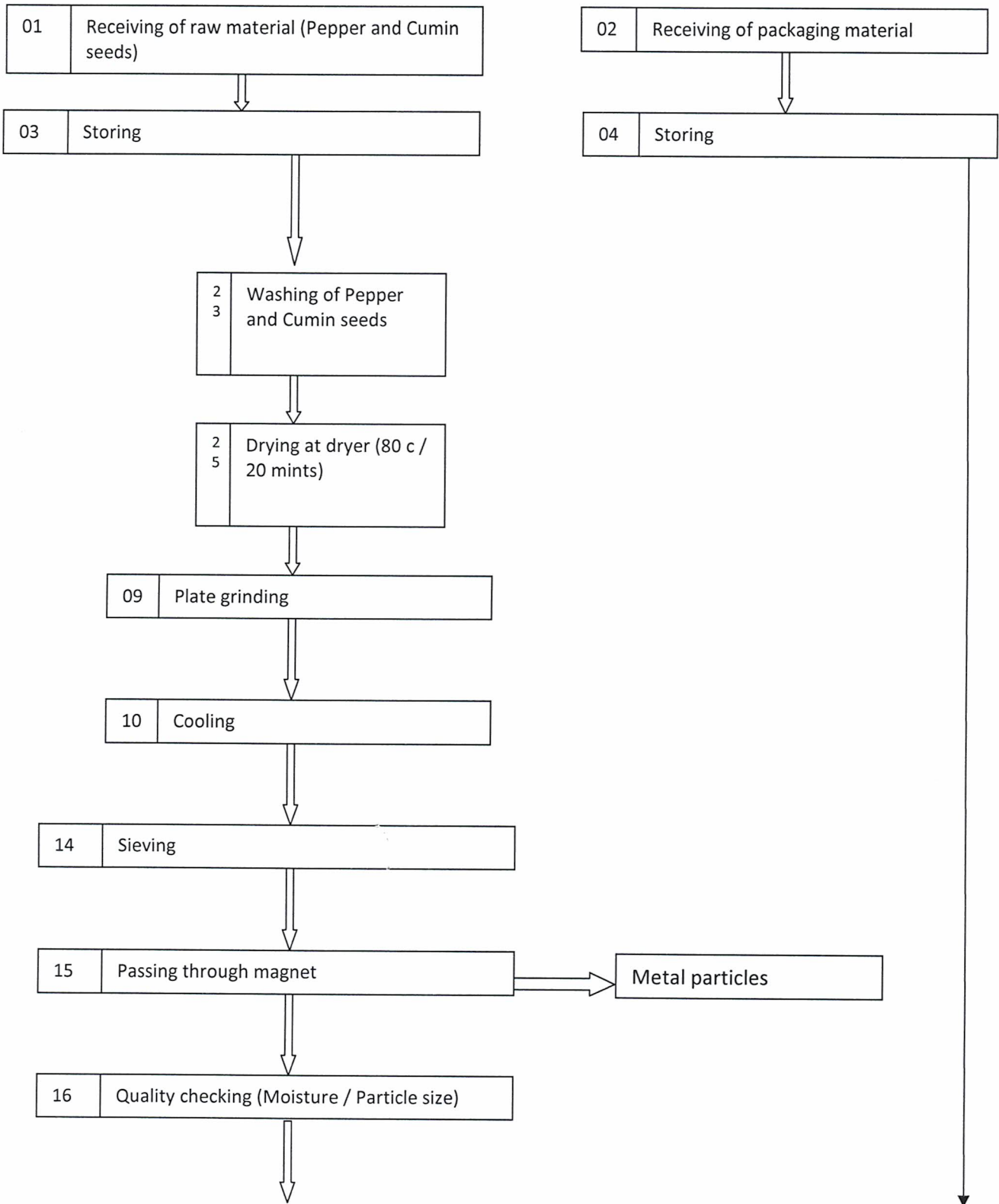
On site Verification by FSTL on behalf of FST: Date:.....

Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD



Flow Diagram for Pepper and Cumin Seeds

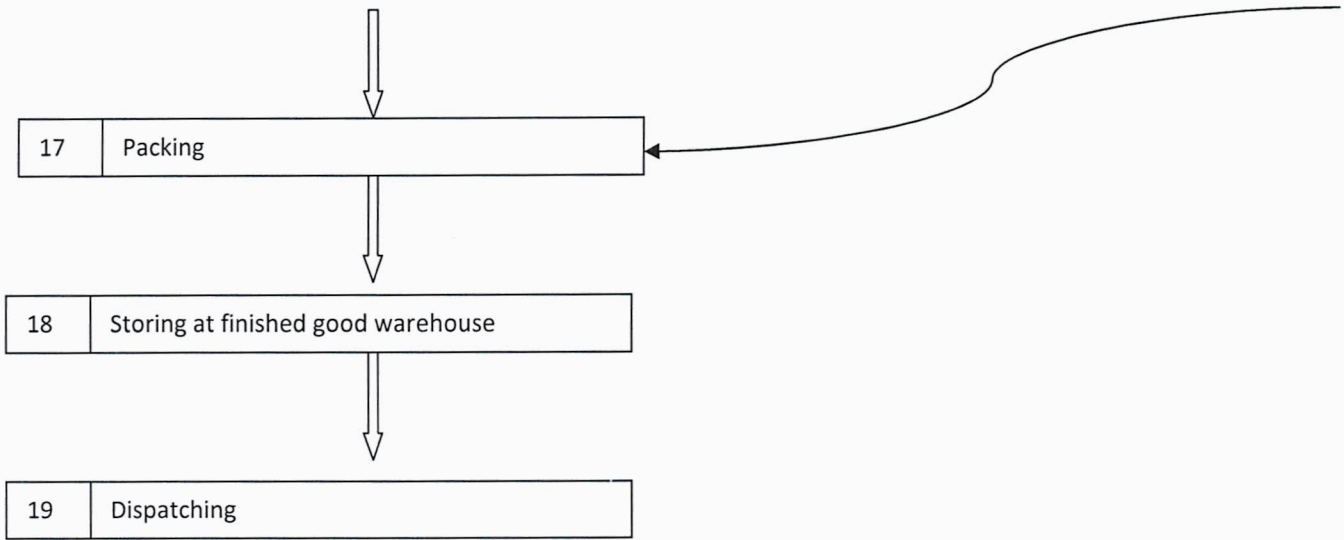
CF/FD/04



Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD

Flow Diagram for Pepper and Cumin Seeds

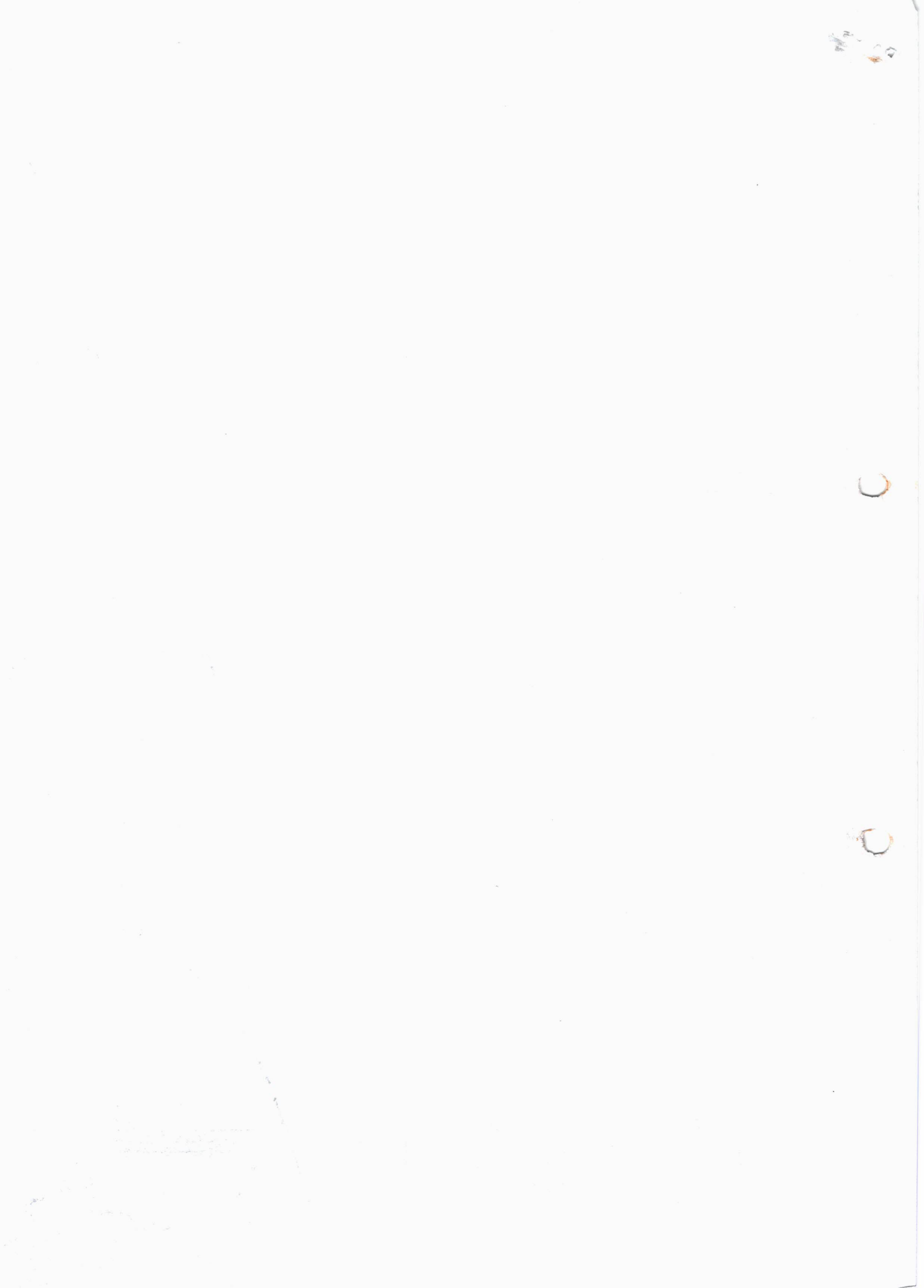
CF/FD/04



On site Verification by FSTL on behalf of FST:

Date:.....

Date of Issued:	2017/08/15	Issue Number:	01
Date of Revised:	YYYY/MM/DD	Revised Number:	00
Reviewed by:	Factory Executive	Approved by:	MD



FORM 1 (Page1)

Application for
REGISTRATION OF A COMPANY

(Section 4(1))

Section 4(1) of Companies Act No. 7 of 2007 ("the Act")
(If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format)

PAYMENT RECEIVED
Rs: 1000/-
Receipt No: 373425
10 FEB 2014
Dept of the Registrar of companies
Shroff
185318

No. of Company **

--	--	--	--	--

Type of the Company

PRIVATE LIMITED COMPANY
Please see Section 3(1) of the Act

Name of Proposed Company

CHILLICO (PVT) LTD

Name Approval number

185318

Registered Address

INDUSTRIAL ZONE,
ULLAPANE.

(This must be a physical address in Sri Lanka and must not be a PO Box address)

DECLARATION UNDER SECTION 4(1)(a) OF THE ACT

I/We* declare that to the best of my/our* knowledge the name of this proposed company is not identical or similar to that of any existing company.

ARTICLES OF ASSOCIATION

- The Articles of Association of the proposed Company shall be as set out in the first schedule to the Act.
- The Articles of Association of the proposed company shall be as set out in the Annexure "A" signed by each of us *

INITIAL DIRECTORS

The following persons are the initial directors of the proposed company and signify their consent by signing below and certify that each one of them is not disqualified from being appointed or holding office as a director of a company :

Full name ***	NIC No/Passport No.* (Specify Country)	Residential Address	Email Address [optional]	Signature
ATTACHED ANNEXURE - 1				

MUNAS SAMSUDEEN

(DIRECTOR)

Email (Optional): NIL
Telephone: NIL
Facsimile : NIL

* Delete what is not applicable
** To be completed by the Registry
***Please give first name(s) followed by surname in BLOCK letters.

PV 97018
ලියාපදිංචි කරුණ ලද අංකය
සහකාර සමාගම් රෙජිස්ට්‍රාර්
20.11.14. ක්‍රම 02 මස
..... 12 දින කොළඹ දිස්



INITIAL SHARE HOLDERS

The following persons are the initial shareholders of the proposed company

Full Name ***	NIC No/ Passport No.* (Specify Country)	Address **	Signature	Number of Shares (Please indicate if shares are held jointly.)
ATTACHED ANNEXURE - 2				

TOTAL NUMBER OF SHARES

INITIAL SECRETARY / SECRETARIES

The following person(s) shall be the initial Secretary/Secretaries* of the proposed company and he/they* signify his/their* consent by signing below:-

Full Name	Address	Registration No.	Signature
SHAMEER MUNAS	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	<i>[Signature]</i>

Signature of initial shareholders:

1. *[Signature]* 3 *[Signature]*

2. *[Signature]* 4 *[Signature]*

Date:

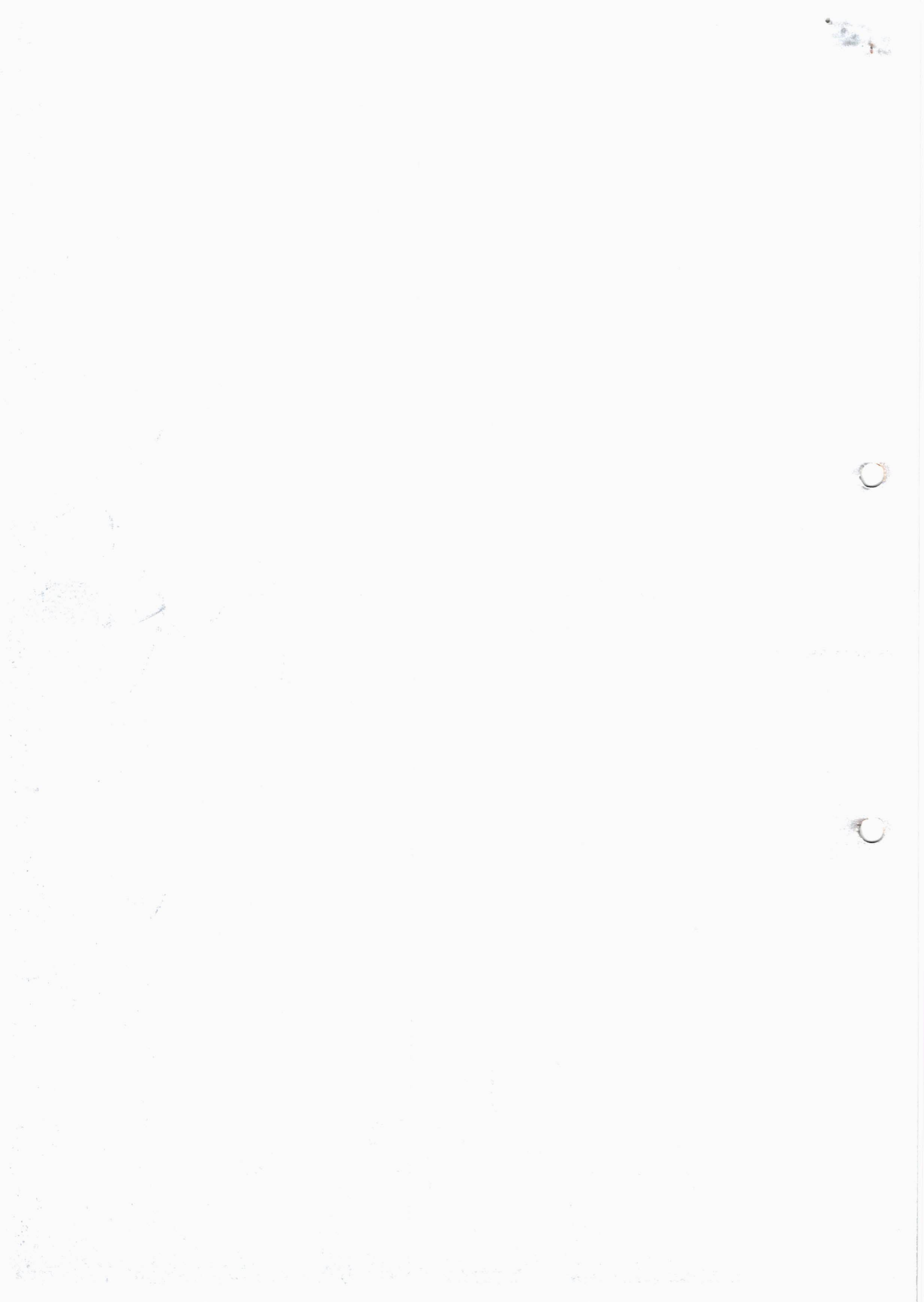
3	1		0	1		1	4
Day		Month			Year		

* Delete what is not applicable

** In the case of a natural person, please give residential address. In the case of a body corporate, please give the registered office address or, if it does not have a registered office, of its principal place of business.

*** In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

P



INITIAL SHARE HOLDERS

The following persons are the initial shareholders of the proposed company

Full Name ***	NIC No/ Passport No.* (Specify Country)	Address **	Signature	Number of Shares (Please indicate if shares are held jointly.)
ATTACHED ANNEXURE - 2				

TOTAL NUMBER OF SHARES

INITIAL SECRETARY / SECRETARIES

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Full Name	Address	Registration No.	Signature
SHAMEER MUNAS	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	<i>[Signature]</i>

Signature of initial shareholders:

1. *[Signature]* 3 *[Signature]*

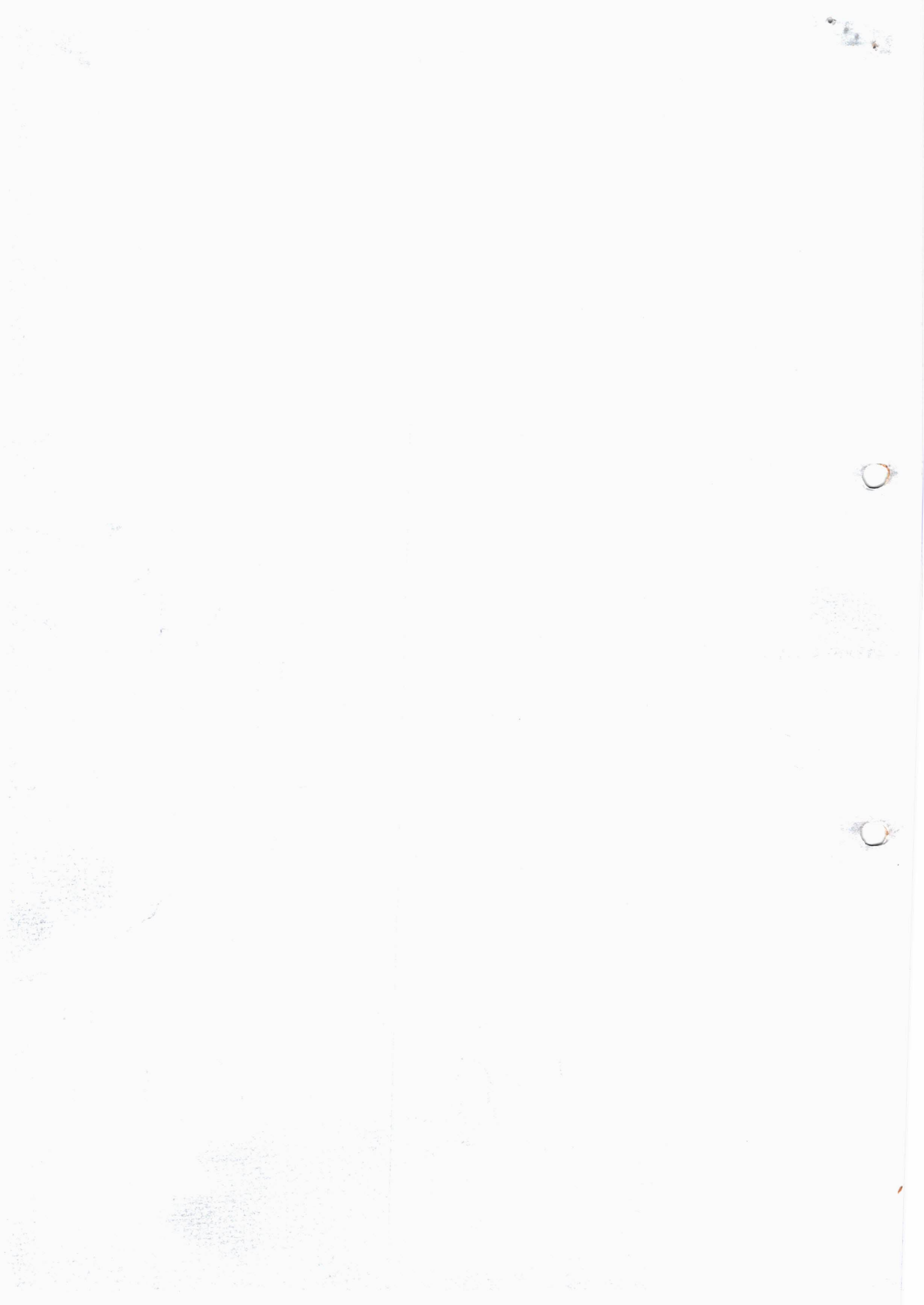
2. *[Signature]* 4 *[Signature]*

Date:

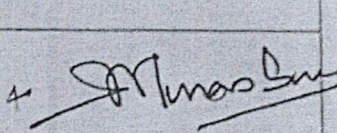
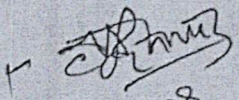
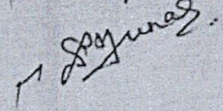
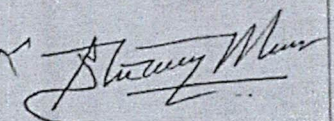
3	1		0	1		1	4
Day		Month			Year		

- * Delete what is not applicable
- ** In the case of a natural person, please give residential address. In the case of a body corporate, please give the registered office address or, if it does not have a registered office, of its principal place of business.
- *** In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

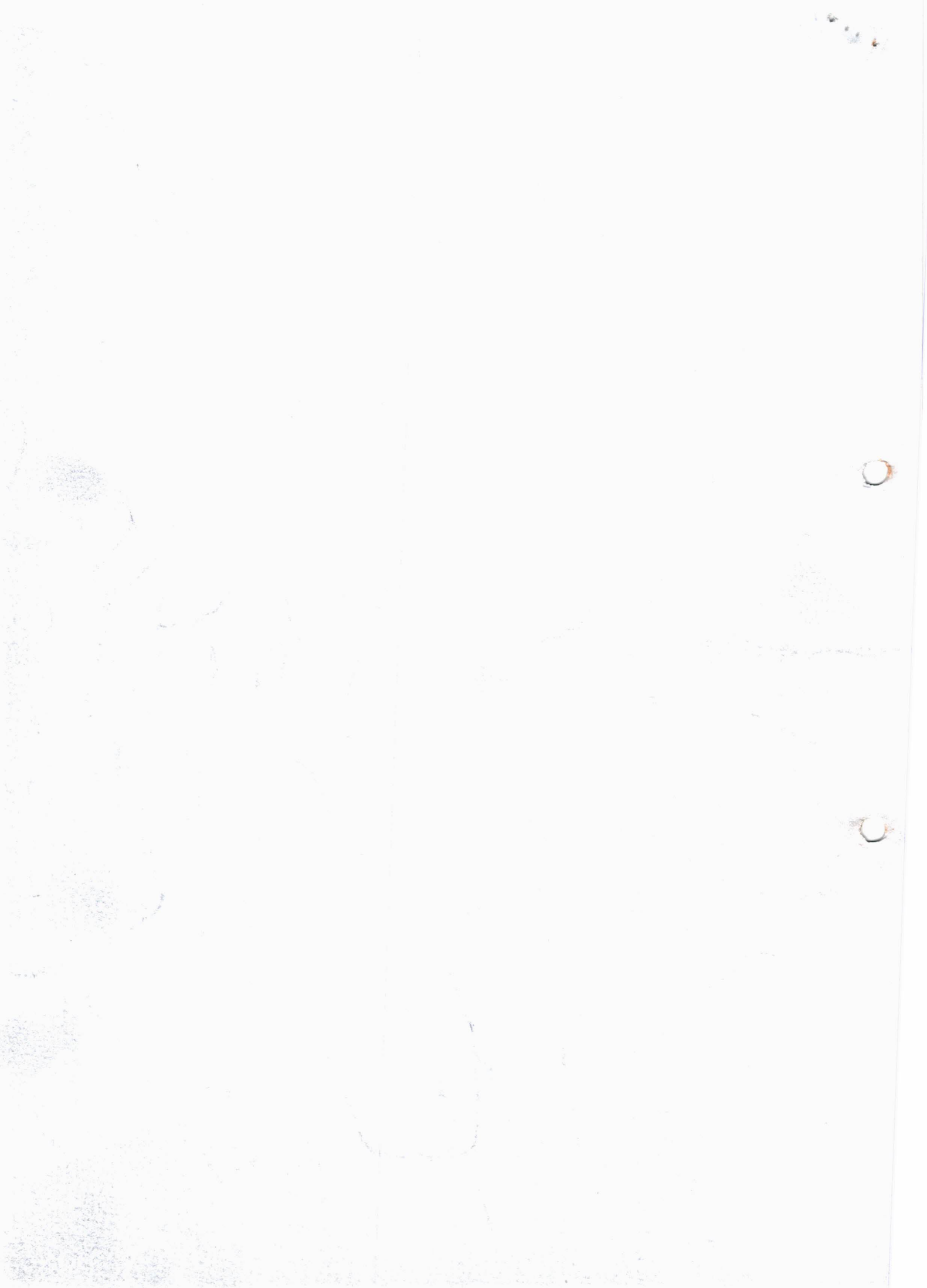
P



ANNEXURE - 1

Full name ***	NIC No/Passport No.* (Specify Country)	Residential Address	Email Address [optional]	Signature
MUNAS SAMSUDEEN	551621154 V	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	
SHAMEER MUNAS	870861737 V	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	
SHAREEN MUNAS	606282710 V	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	
SHAREEQ MUNAS	883633342 V	NO. 234, GALAGEDARA ROAD, KATUGASTOTA.	NIL	

T



2017-09-20

මධ්‍යම පළාත් කාර්යාලය,
පොල්ගොල්ල වෙල්ල අසල,
පොල්ගොල්ල
දුරු. 081-2494884
Email.ceacpo@gmail.com

එම්.එම්.සම්පූර්ණ මයා,
ජින්නා බේකරිය,
ගම්පොල පාර,
ගෙලිමය.

මහත්මයාණෙනි,

පාරිසරික ආරක්ෂණ බලපත්‍රය.

ඉහත බලපත්‍රය ලබාගැනීම සඳහා මව විසින් ඉදිරිපත් කරන ලද 2017-06-30 ඉදිරිපත් කර ඇති පාරිසරික ආරක්ෂණ බලපත්‍ර අවත් කිරීමේ අයදුම්පත්‍රය අනුව 2017-09-20 දිනැති අංක CE-B 00961 (R1)F1 දරණ පාරිසරික ආරක්ෂණ බලපත්‍රය මේ සමග එවමි.

මේ සමග එවනු ලබන පාරිසරික ආරක්ෂණ බලපත්‍රයේ අඩංගු වන යම් කොන්දේසියක් උල්ලංඝනය කිරීම හෝ ඒ කොන්දේසිය අනුව කටයුතු කිරීම පැහැර හැරීම 1988 අංක 56 හා 2000 අංක 53 පනත් වලින් සංශෝධිත 1980 අංක 47 දරණ ජාතික පාරිසරික පනත යටතේ දඬුවම් ලැබිය හැකි වරදක් බව කරුණාවෙන් සලකන්න.

මෙම බලපත්‍රය නැවත අවත් කිරීමේ අයදුම්පත්‍රයක් බලපත්‍රයේ සඳහන් අවලංගු වන දිනට මාස 03 කට පෙර මධ්‍යම පරිසර අධිකාරිය වෙත ඉදිරිපත් කර අදාල බලපත්‍රය නැවත අවත් කරවා ගන්නා ලෙස මෙයින් දන්වමි.

මේ සම්බන්ධයෙන් මෙම අධිකාරියට යොමුකරන සියළුම ලියකියවිලි වල ඉහත සඳහන් අපේ යොමු අංකය සඳහන් කළයුතුය.

මෙයට විශ්වාසි.

කේ.පී.වැලිකන්නගේ
අධ්‍යක්ෂ (මධ්‍යම පළාත),
මධ්‍යම පරිසර අධිකාරිය,
පොල්ගොල්ල.

මධ්‍යම පළාත් කාර්යාලය
පොල්ගොල්ල

- පිටපත්:- 1. ලේකම්/බලයලත් නිලධාරී, ගග ඉහල කෝරළේ ප්‍රාදේශීය සභාව.
- 2. නියෝජ්‍ය අධ්‍යක්ෂ ජනරාල්, (පරිසර දූෂණ පාලන).

මෙම නිවැරදි කාර්යාල නිවැරදි
නිවැරදි කාර්යාල

11/11/17
අධ්‍යක්ෂ

මධ්‍යම පරිසර අධිකාරිය
මධ්‍යම පළාත් කාර්යාලය
පොල්ගොල්ල

