

AUTHORISATION OF AGENT

**TRADE MARKS ACT
(REGULATION 16)**

I/We.....

of.....

Have appointed Messrs. **STILLWATERS LAW FIRM** of 18, James George Street, P.O. Box 56161, Ikoyi 101008, Lagos, Nigeria to act as my/our agents for the registration/renewal/assignment of Trade Mark (s)

.....
.....

and request that all notices, requisitions and communication, if any, in respect of the same matter or proceeding may be sent to our above mentioned agents at the above address.

I/We hereby declare that I am/We a/are

Dated this **day of** **20**.....

(Signed):
Secretary/Director/Manager

Address.....
.....

To:
The Registrar of Trade Marks
Commercial Law Section
Trade Marks Department
Federal Ministry of Commerce
Garki,
Abuja.