

Sale and Transfer of Shares in a German Limited Liability Company (GmbH / UG)

The following checklist facilitates the efficient preparation for the upcoming notarisation. We therefore kindly ask you to complete the list as far as possible and submit it to us. Of course we are available for any further questions or personal assistance. We thank you in advance for contacting Schwab | Weiler | Notare and look forward to our further cooperation.

Company	
Company Name	
Legal Seat (Town/City)	
Register Court	
HRB No.	
Company's Address (Street, No., ZIP Code, Place)	
Lawyer / Tax Consultant involved	

Transferor / Seller	Transferor 1	Transferor 2	Transferor 3
(Company) Name			
(all) First Names / if applicable Maiden Name			
Date of Birth / No. of Commercial Register			
Street, No.			
ZIP Code, Place			
Profession			
Phone / Fax			
E-Mail			
Nationality			
Marital Status	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed
Marital Property Regime (if married)	<input type="checkbox"/> no marriage contract <input type="checkbox"/>	<input type="checkbox"/> no marriage contract <input type="checkbox"/>	<input type="checkbox"/> no marriage contract <input type="checkbox"/>
Date of Marriage			
Domicile at time of marriage			
Number and amount of shares sold (serial no.)			
Payment made on the shares	<input type="checkbox"/> full <input type="checkbox"/> half	<input type="checkbox"/> full <input type="checkbox"/> half	<input type="checkbox"/> full <input type="checkbox"/> half
Purchase Price €			
Due Date			
Effectiveness of transfer	<input type="checkbox"/> immediately <input type="checkbox"/> on <input type="checkbox"/> upon payment	<input type="checkbox"/> immediately <input type="checkbox"/> on <input type="checkbox"/> upon payment	<input type="checkbox"/> immediately <input type="checkbox"/> on <input type="checkbox"/> upon payment
Transferor's shareholder loan	<input type="checkbox"/> no <input type="checkbox"/> yes, in the amount of	<input type="checkbox"/> no <input type="checkbox"/> yes, in the amount of	<input type="checkbox"/> no <input type="checkbox"/> yes, in the amount of

Purchaser	Purchaser 1	Purchaser 2	Purchaser 3
(Company) Name			
(all) First Names / if applicable Maiden Name			
Date of Birth / No. of Commercial Register			
Street, No.			
ZIP Code, Place			
Profession			
Phone / Fax			
E-Mail			
Nationality			
Marital Status	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed	<input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> marr. <input type="checkbox"/> widowed
Marital Property Regime (if married)	<input type="checkbox"/> no marriage contract <input type="checkbox"/>	<input type="checkbox"/> no marriage contract <input type="checkbox"/>	<input type="checkbox"/> no marriage contract <input type="checkbox"/>
Date of Marriage			
Domicile at time of marriage			
Number of shares purchased (serial no.)			

Modifications / Amendments with respect to the share purchase

Managing Directors	Managing Director 1	Managing Director 2	Managing Director 3
Modification	<input type="checkbox"/> Appointment <input type="checkbox"/> Dismissal <input type="checkbox"/> Resignation	<input type="checkbox"/> Appointment <input type="checkbox"/> Dismissal <input type="checkbox"/> Resignation	<input type="checkbox"/> Appointment <input type="checkbox"/> Dismissal <input type="checkbox"/> Resignation
First Names, Name			
Maiden Name			
Date of Birth			
Street, No.			
ZIP Code, Place			
Power of Representation	<input type="checkbox"/> solely <input type="checkbox"/> jointly with another Managing Director / Proxy Holder	<input type="checkbox"/> solely <input type="checkbox"/> jointly with another Managing Director / Proxy Holder	<input type="checkbox"/> solely <input type="checkbox"/> jointly with another Managing Director / Proxy Holder
Prohibition of self-dealing	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release	<input type="checkbox"/> release <input type="checkbox"/> no release

Articles	
New Company Name (Town/City)	
New Legal Seat (political Community)	
New Address	
New purpose of enterprise	
Others / Notes	

Draft

Post

Fax

E-Mail

Pick-up

Preferred Appointment Date