

**MINUTES OF MEETING OF DIRECTORS OF RYSSA
SUPERANNUATION(CORPORATE TRUSTEE) OF
SUPER FORRESTER**

Venue	18 22nd Ave WEST HOXTON NSW 2171 Australia
Date & Time	
Present	Gary John Forrester Nerissa Forrester
Chairperson	Gary John Forrester

TABLED: Draft Trust Deed, Application to become members & proposed Investment Strategy.

RESOLVED THAT:

Establishment of Fund The persons present intend to form a superannuation fund to provide retirement benefits for Eligible persons and agree to act as the director of trustee company of the Fund.

Name of the fund The fund will be called SUPER FORRESTER. The fund will be a Self Managed Superannuation Fund.

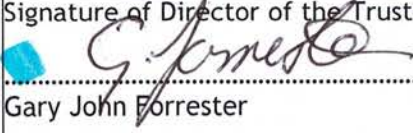
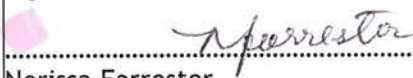
Execute Trust Deed The Directors of the Trustee Company will execute the Trust Deed tabled at the meeting. The fund will be a regulated complying superannuation fund and commence on the day of execution of the Trust Deed.

Application to be regulated The Directors of the Trustee Company will make an application with the regulator to elect the fund to be a regulated fund and register the fund for, Australian Business Number, Tax File Number and Goods & Services Tax (if necessary).

Application for Members The application forms to become members in the fund received from following persons
Gary John Forrester
Nerissa Forrester
are accepted and trustees will give members details, of the benefits provided under Rules of this Fund.

Information to members	The members have been provided with Product Disclosure Statement of the fund and all the necessary information regarding the fund.
Investment Strategy	The Directors of the Trustee Company will formulate an Investment strategy for the Fund and this will be documented and reviewed on a regular basis.
Bank Account	The Directors of the Trustee Company will open a bank account in the name of the Fund. And with the bank be operated by one or more Directors of the Trustee Company who will be the signatories to the bank account
Appointment of fund Accountant	Appointed as the funds Accountant : AVS BUSINESS SERVICES PTY LTD
Appointment of fund Auditor	Appointed as the funds Auditor :
Appointment of fund Financial Advisor	Appointed as the Financial Advisor : CHRISTOPHER EDWARD LUFF
Contributions, Rollovers & investments	The Directors of the Trustee Company are empowered to Receive contributions and rollovers for members and invest monies as per investment strategy of the fund.

There being no further matters to discuss, the meeting was closed.

Signature of Director of the Trustee Company  Gary John Forrester	Date 12 / 09 / 18
Signature of Director of the Trustee Company  Nerissa Forrester	Date 14 / 09 / 18

Investment Strategy

SUPER FORRESTER

Objectives:

The objective of the fund is to:

- Provide superannuation benefits to members and their dependants to meet their retirement need.
- Ensure that appropriate mixes of investments are held by the fund to support these needs.

Investment objective of the trustee's is to aim to achieve real medium to longer-term growth, whilst maintaining a low level of risk.

Investment Choice:

The Trustees have determined the fund's investment may include but not be limited to all or one of the following:

- Direct equities, stocks and derivatives and including the participation in dividend reinvestment program, right issues and the like:
- Property trusts and associated investments:
- Managed investments and associated products:
- Direct residential, industrial commercial property investment:
- Bank and other financial institution securities including Term Deposits, Debentures, Secured and Unsecured Notes and Bonds:
- Any other investment that the trustees may feel prudent to achieve the objective of the fund.

The Trustee may from time to time decide to seek professional advice to Accountants, Solicitors or Financial Planners in the formulation of any their future investment strategy.

In formulating this strategy the trustees have taken into consideration relevant features of the various investments in accordance with both the fund's objectives and appropriate legislation.

While drafting this investment strategy, the trustees have taken into account all of the circumstances of the fund, including but not limited to:

- the risks involved in making each investment;
- the likely return from making each investment;
- the range and diversity of investments;
- any risks coming from limited diversification;
- the liquidity of the fund's investments;
- expected cash flow requirements; and
- the ability of the fund to meet its existing and prospective liabilities such as paying benefits to its members.

- Whether the trustees of the fund should hold insurance cover for one or more members of the fund.

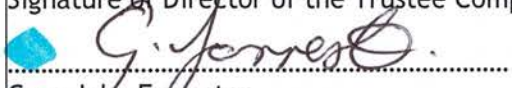

Policies:

The policies adopted by the Trustees in order to achieve these objectives are:

- Regular monitoring of the performance of the fund’s investment, to oversee the overall investment mix and the expected cash flow requirements of the fund.
- Balancing the fund’s investment portfolio due to changes in market conditions, by further sale and purchase of investments.

The Trustee’s aim will always be to ensure that they follow the investment strategy, however, the Trustees will at all time reserve the right to change the investment mix depending on the market situation and opportunities available to strengthen its Objectives.

A copy of current investment strategy of the fund will be made available to all members of the fund.

Signature of Director of the Trustee Company  Gary John Forrester	Date 14 10 18
Signature of Director of the Trustee Company  Nerissa Forrester	Date 14 10 18

Trustee Consent Form

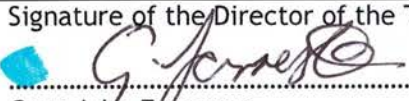
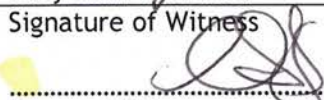
SUPER FORRESTER

I, Gary John Forrester Of 18 22nd Ave WEST HOXTON NSW-2171 Australia consent to act as a Director of the Trustee Company.

I declare that:

- I have never been found guilty of a dishonest conduct offence in Australia or elsewhere.
- I am not a bankrupt and I have not, in the preceding 3 years from the date of this statement, entered into a deed of assignment or arrangement or a composition with my creditors under part X of the Bankruptcy Act.
- I am not, disqualified from acting as a trustee or as a responsible officer of a trustee company* under the Superannuation Industry (Supervision) Act.
- I understand my role & responsibility as a director of the trustee company of SUPER FORRESTER,
- I have read and understood the trust deed and the attached product disclosure statement and agree to abide to the trust deed and superannuation law.
- I agree to comply with the requirements of the Superannuation Industry (Supervision) Act 1993 (the SIS Act) and the Superannuation Industry (Supervision) Regulations 1994 (the SIS Regulations).
- I agree to comply, in all material respects, with the relevant requirements of the following provisions (to the extent applicable) of the SIS Act and the SIS Regulations. Sections 17A, 35AE, 35B, 35C(2), 62, 65, 66, 67, 67A, 67B, 82-85, 103, 104, 104A, 105, 109 & 126K Regulations 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14 & 13.18AA.

* If a company is acting as the trustee of the Fund, a receiver, or a receiver and manager, or an official manager, or a deputy official manager, or a provisional liquidator has not been appointed in respect of the company acting as trustee nor has it begun to be wound up.

Signature of the Director of the Trustee Company  Gary John Forrester	Date 14 10 18
Signature of Witness  Name of Witness CHMS WFF	Date 14 10 18

Trustee Consent Form


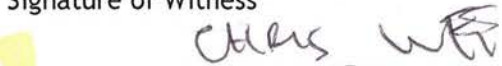
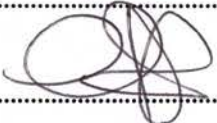
SUPER FORRESTER

I, Nerissa Forrester Of 18 22nd Ave WEST HOXTON NSW-2171 Australia consent to act as a Director of the Trustee Company.

I declare that:

- I have never been found guilty of a dishonest conduct offence in Australia or elsewhere.
- I am not a bankrupt and I have not, in the preceding 3 years from the date of this statement, entered into a deed of assignment or arrangement or a composition with my creditors under part X of the Bankruptcy Act.
- I am not, disqualified from acting as a trustee or as a responsible officer of a trustee company* under the Superannuation Industry (Supervision) Act.
- I understand my role & responsibility as a director of the trustee company of SUPER FORRESTER,
- I have read and understood the trust deed and the attached product disclosure statement and agree to abide to the trust deed and superannuation law.
- I agree to comply with the requirements of the Superannuation Industry (Supervision) Act 1993 (the SIS Act) and the Superannuation Industry (Supervision) Regulations 1994 (the SIS Regulations).
- I agree to comply, in all material respects, with the relevant requirements of the following provisions (to the extent applicable) of the SIS Act and the SIS Regulations. Sections 17A, 35AE, 35B, 35C(2), 62, 65, 66, 67, 67A, 67B, 82-85, 103, 104, 104A, 105, 109 & 126K Regulations 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14 & 13.18AA.

* If a company is acting as the trustee of the Fund, a receiver, or a receiver and manager, or an official manager, or a deputy official manager, or a provisional liquidator has not been appointed in respect of the company acting as trustee nor has it begun to be wound up.

Signature of the Director of the Trustee Company  Nerissa Forrester	Date 14 10 18
Signature of Witness  Name of Witness 	Date 14 10 18

SUPER FORRESTER

Application for membership

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

[N.B.: Choices in [brackets] must be struck out if not relevant].

I hereby apply for membership of this fund as an initial member of this fund under the trust deed. I hereby make the following declarations as listed below:

- I have read and understood the trust deed, including all the terms relating to withdrawal of benefits payable in the deed, and the preceding Product Disclosure Statement (PDS),
- I have read the requirements of supplying my tax file number in the PDS; I hereby supply my tax file number to the trustee of this superannuation fund.
- I have read and understood the trust deed and Product Disclosure Statement and understand my role & responsibility as member and director of the trustee company of the fund.
- I am not in an employment relationship with [any other member/any other member except a relative of myself].
- I am not disqualified person, under superannuation law, from being director of the trustee company of the fund.
- I will, as member, abide by and comply with all requirements of the trust deed.
- I will fully and truthfully disclose any information relating to my membership of the fund that is required by the trustee, disclosing such information in writing as soon as is practicable upon such a request being made by the trustee, including:
 - If I have entered into an employment relationship with any other member of the fund who is not also a relative of myself, then any information about the circumstances leading to such a relationship
 - Any information about any circumstance (if any) that may disqualify me under superannuation law from being director of the trustee company of the fund.
 - Any information that relates to my medical condition, whether or not I have any medical problems.
- I will also act as a director of the trustee company of this fund.

Member details

Name	Gary John Forrester
Address	18 22nd Ave WEST HOXTON NSW-2171 Australia
Place of Birth	BANKSTOWN - Australia
Date of birth	18/05/1968
Tax File Number	155142404


Gary John Forrester

Dated.....11.09.2018.....

SUPER FORRESTER

Nomination of dependants

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

[N.B.: Choices in [brackets] must be struck out if not relevant].

Important information for completion

[This constitutes a direction to the trustee of the fund as to the manner of apportionment of any benefit from the fund that is payable upon your death; which direction is a non-binding death benefit notice in spite of the existence of which the trustee shall retain its discretion as to how to apply any benefit that is so payable upon your death.]

1. This nomination notice is not binding. The trustee will take it into account in the event that a benefit is paid from the fund on your death. However, the trustee has complete discretion as to which of your dependants and/or legal personal representative may receive the benefit and in what proportions. If there are no dependants or legal personal representative, the benefit may be payable as per the terms of the deed. Your death benefit can be paid as a pension or a lump sum.
2. This nomination notice must be fully completed in accordance with the details below
 - the beneficiaries named in this notice must be dependants and/or your legal personal representative.
 - Your dependants are your spouse, de facto spouse and your children (including step, adopted and ex-nuptial children), and any other person financially dependent upon you at the time of your death.
 - Your legal personal representative is either the person named as your executor in your will, or, if you do not have a valid will at the date of your death, the person who, as your next of kin, applies for and has been granted letters of administration for your estate. Should you wish to nominate your legal personal representative, please write "legal personal representative" as the name of the beneficiary.
 - for each person nominated, you must provide both their relationships to you and the proportion of any benefit that is to be paid to each.

Nomination of beneficiaries / dependants

Name	Relationship to you	Proportion of benefit (%)
Nerissa Forrester	Wife	Allocation 100%

Member declaration

I, Gary John Forrester Of 18 22nd Ave WEST HOXTON NSW-2171 Australia hereby direct the directors of the trustee that the [person/persons] named in the above table [are/is] to receive the proportions specified therein of any benefit that is payable upon my death from SUPER FORRESTER.

I understand that

- in the event of my death, the trustees have complete discretion as to which of my dependants and/or estate will receive any death benefit payable.
- this notice revokes and amends any previous notice supplied to the trustee of the fund in regard to my nominated beneficiaries.

Signature of member  Gary John Forrester	Date 14 10 18
--	------------------

SUPER FORRESTER

Application for membership

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

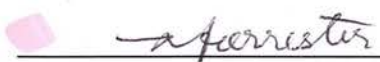
[N.B.: Choices in [brackets] must be struck out if not relevant].

I hereby apply for membership of this fund as an initial member of this fund under the trust deed. I hereby make the following declarations as listed below:

- I have read and understood the trust deed, including all the terms relating to withdrawal of benefits payable in the deed, and the preceding Product Disclosure Statement (PDS),
- I have read the requirements of supplying my tax file number in the PDS; I hereby supply my tax file number to the trustee of this superannuation fund.
- I have read and understood the trust deed and Product Disclosure Statement and understand my role & responsibility as member and director of the trustee company of the fund.
- I am not in an employment relationship with [any other member/any other member except a relative of myself].
- I am not disqualified person, under superannuation law, from being director of the trustee company of the fund.
- I will, as member, abide by and comply with all requirements of the trust deed.
- I will fully and truthfully disclose any information relating to my membership of the fund that is required by the trustee, disclosing such information in writing as soon as is practicable upon such a request being made by the trustee, including:
 - If I have entered into an employment relationship with any other member of the fund who is not also a relative of myself, then any information about the circumstances leading to such a relationship
 - Any information about any circumstance (if any) that may disqualify me under superannuation law from being director of the trustee company of the fund.
 - Any information that relates to my medical condition, whether or not I have any medical problems.
- I will also act as a director of the trustee company of this fund.

Member details

Name	Nerissa Forrester
Address	18 22nd Ave WEST HOXTON NSW-2171 Australia
Place of Birth	NAVOTAS MM - Philippines
Date of birth	4/08/1979
Tax File Number	820828551



Nerissa Forrester

Dated.....10.09.18.....

SUPER FORRESTER

Nomination of dependants

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

[N.B.: Choices in [brackets] must be struck out if not relevant].

Important information for completion

[This constitutes a direction to the trustee of the fund as to the manner of apportionment of any benefit from the fund that is payable upon your death; which direction is a non-binding death benefit notice in spite of the existence of which the trustee shall retain its discretion as to how to apply any benefit that is so payable upon your death.]

1. This nomination notice is not binding. The trustee will take it into account in the event that a benefit is paid from the fund on your death. However, the trustee has complete discretion as to which of your dependants and/or legal personal representative may receive the benefit and in what proportions. If there are no dependants or legal personal representative, the benefit may be payable as per the terms of the deed. Your death benefit can be paid as a pension or a lump sum.
2. This nomination notice must be fully completed in accordance with the details below
 - the beneficiaries named in this notice must be dependants and/or your legal personal representative.
 - Your dependants are your spouse, de facto spouse and your children (including step, adopted and ex-nuptial children), and any other person financially dependent upon you at the time of your death.
 - Your legal personal representative is either the person named as your executor in your will, or, if you do not have a valid will at the date of your death, the person who, as your next of kin, applies for and has been granted letters of administration for your estate. Should you wish to nominate your legal personal representative, please write "legal personal representative" as the name of the beneficiary.
 - for each person nominated, you must provide both their relationships to you and the proportion of any benefit that is to be paid to each.

Nomination of beneficiaries / dependants

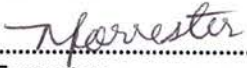
Name	Relationship to you	Proportion of benefit (%)
Gary Forrester	Husband	Allocation 100%

Member declaration

I, Nerissa Forrester Of 18 22nd Ave WEST HOXTON NSW-2171 Australia hereby direct the directors of the trustee that the [person/persons] named in the above table [are/is] to receive the proportions specified therein of any benefit that is payable upon my death from SUPER FORRESTER.

I understand that

- in the event of my death, the trustees have complete discretion as to which of my dependants and/or estate will receive any death benefit payable.
- this notice revokes and amends any previous notice supplied to the trustee of the fund in regard to my nominated beneficiaries.

Signature of member  Nerissa Forrester	Date 14 10 18
--	------------------