



GOVERNMENT OF INDIA  
MINISTRY OF CORPORATE AFFAIRS

Central Registration Centre

## Certificate of Incorporation

[Pursuant to sub-section (2) of section 7 and sub-section (1) of section 8 of the Companies Act, 2013 (18 of 2013) and rule 18 of the Companies (Incorporation) Rules, 2014]

I hereby certify that SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED is incorporated on this Second day of September Two thousand twenty-two under the Companies Act, 2013 (18 of 2013) and that the company is limited by shares.

The Corporate Identity Number of the company is U63040HR2022OPC106338.

The Permanent Account Number (PAN) of the company is **ABJCS3142G** \*

The Tax Deduction and Collection Account Number (TAN) of the company is **RTKS39123A** \*

Given under my hand at Manesar this Eighth day of September Two thousand twenty-two .

DS MINISTRY OF  
CORPORATE AFFAIRS 10

Digital Signature Certificate

PANKAJ SRIVASTAVA

DEPUTY REGISTRAR OF COMPANIES

For and on behalf of the Jurisdictional Registrar of Companies

Registrar of Companies

Central Registration Centre

Disclaimer: This certificate only evidences incorporation of the company on the basis of documents and declarations of the applicant(s). This certificate is neither a license nor permission to conduct business or solicit deposits or funds from public. Permission of sector regulator is necessary wherever required. Registration status and other details of the company can be verified on [www.mca.gov.in](http://www.mca.gov.in)

Mailing Address as per record available in Registrar of Companies office:

SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED

SCO F-83/22, GURUGRAM, GURUGRAM, Gurgaon, Haryana, India,

122017




\* as issued by the Income Tax Department





ई-स्थायी लेखा संख्या कार्ड  
e - Permanent Account Number (e-PAN) Card  
ABJCS3142G

नाम / Name	SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED
निगमन/गठन की तारीख Date of Incorporation / Formation	02/09/2022
	

- ✓ Permanent Account Number (PAN) facilitate Income Tax Department linking of various documents, including payment of taxes, assessment, tax demand tax arrears, matching of information and easy maintenance & retrieval of electronic information etc. relating to a taxpayer. स्थायी लेखा संख्या (पैन) एक करदाता से संबंधित विभिन्न दस्तावेजों को जोड़ने में आयकर विभाग को सहायक होता है, जिसमें करों के भुगतान, आकलन, कर मांग, टैक्स बकाया, सूचना के मिलान और इलक्ट्रॉनिक जानकारी का आसान रखरखाव व बहाली आदि भी शामिल है।
- ✓ Quoting of PAN is now mandatory for several transactions specified under Income Tax Act, 1961 (Refer Rule 114B of Income Tax Rules, 1962) आयकर अधिनियम, 1961 के तहत निर्दिष्ट कई लेनदेन के लिए स्थायी लेखा संख्या (पैन) का उल्लेख अब अनिवार्य है (आयकर नियम, 1962 के नियम 114B, का संदर्भ लें)
- ✓ Possessing or using more than one PAN is against the law & may attract penalty of upto Rs. 10,000. एक से अधिक स्थायी लेखा संख्या (पैन) का रखना या उपयोग करना, कानून के विरुद्ध है और इसके लिए 10,000 रुपये तक का दंड लगाया जा सकता है।
- ✓ The PAN Card enclosed contains Enhanced QR Code which is readable by a specific Android Mobile App. Keyword to search this specific Mobile App on Google Play Store is "Enhanced QR Code Reader for PAN Card". सलग पैन कार्ड में एनहान्स क्यूआर कोड शामिल है जो एक विशिष्ट एंड्रॉइड मोबाइल ऐप द्वारा पठनीय है। Google Play Store पर इस विशिष्ट मोबाइल ऐप को खोजने के लिए कीवर्ड "Enhanced QR Code Reader for PAN Card" है।

-Cut-

<p>आयकर विभाग INCOME TAX DEPARTMENT</p> <p>स्थायी लेखा संख्या कार्ड Permanent Account Number Card ABJCS3142G</p> <p>नाम / Name SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED</p> <p>निगमन/गठन की तारीख Date of Incorporation/Formation 02/09/2022</p>	<p>भारत सरकार GOVT. OF INDIA</p> <p></p>	<p>इस कार्ड के खोने/पाने पर कृपया सूचित करें/लौटाएं:</p> <p>आयकर पैन सेवा इकाई, एन एस डी एल 5 वीं मंजिल, मंत्री स्टर्लिंग, प्लॉट नं. 341, सर्वे नं. 997/8, मॉडल कॉलोनी, दीप बंगला चौक के पास, पुणे - 411 016.</p> <p>If this card is lost / someone's lost card is found, please inform / return to : Income Tax PAN Services Unit, NSDL 5th Floor, Mantri Sterling, Plot No. 341, Survey No. 997/8, Model Colony, Near Deep Bungalow Chowk, Pune - 411 016.</p> <p>Tel: 91-20-2721 8080, Fax: 91-20-2721 8081 e-mail: tininfo@nsdl.co.in</p>
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Electronically issued and Digitally signed ePAN is a valid mode of issue of Permanent Account Number (PAN) post amendments in clause (c) in the Explanation occurring after sub-section (8) of Section 139A of Income Tax Act, 1961 and sub-rule (6) of Rule 114 of the Income Tax Rules, 1962. For more details, [click here](#)



# आयकर विभाग INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

सत्यमेव जयते



Sep 02, 2022

Ref.No.: 88305919179122/TAN/NEW

TO,  
SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED  
SCO F-83/22  
GURUGRAM  
GURUGRAM, GURGAON-122017  
HARYANA  
TEL.NO.:8901004567

Madam,

**Sub : Allotment of Tax Deduction Account Number  
(TAN) as per Income Tax Act, 1961**

Kindly refer to your application (Form 49B) dated Sep 02, 2022 for the allotment of Tax Deduction Account Number.

In this connection, the following TAN has been issued to you/your organisation:

**RTKS39123A**

Please quote the same in all TDS challans, TDS Certificates, TDS returns, Tax Collection at Source (TCS) returns as well as other documents pertaining to such transactions.

Quoting of TAN on all TDS returns and challans for payment of TDS is necessary to ensure credit of TDS paid by you and faster processing of TDS returns.

The above TAN should also be used as Tax Collections at Source Account Number under section 206CA.

Kindly note that it is mandatory to quote TAN while furnishing TDS returns, including e-TDS returns. e-TDS returns will not be accepted if TAN is not quoted.

This supersedes all the Tax Deduction / Collection Account Number, allotted to you earlier.

**Income Tax Department**

**Caution :** Income Tax Department does not send e-mails regarding refunds and does not seek any taxpayer information like username, password, details of ATM, bank accounts, credit cards, etc. Taxpayers are advised not to part with such information on the basis of emails.



**FORM TM-M**


**THE TRADE MARKS ACT, 1999**  
**Form of Authorization of an Agent**  
**POWER OF ATTORNEY**  
**{Section 145, Rule 19}**

**Agent Code: 33252**  
**Registration No.: TMA/1742**

I, SANYOG GUPTA S/o RADHEY KISHAN GUPTA, R/o C -1054-I SUSHANT LOK PHASE-1 NEAR MOTHER DAIRY, 122009, GURGAON, HARYANA, (hereinafter referred to as "the **Applicant**") do hereby authorize **Mr. Nitesh**, proprietor of **M/s. Nitesh Om & Associates**, Company Secretaries, Haryana, having its offices at 37, Gali No.-2, Shakti Nagar, Rewari, Haryana- 123401, India (Hereinafter referred to as "**the Agent**") to act as my agent for filing of Trade Mark Application in the name of the **Applicant**. The above said agent is also authorized to appear and file oppositions, evidence, mark statements before the Registrar of Trade Marks, and to pay all necessary fees and costs incurred as may be required from time to time on our behalf. I undertake to pay all professional fees that may be charged to me, till this power is specifically revoked in writing.

I hereby revoke all previous authorizations, if any, and confirm the action already taken by the agents above named or to be taken in future including notification of documents and notices and counter statement filed on my behalf. All communications relating to this authorization may be sent to the following address in India.

Place: Gurgaon  
Date: 23.08.2022

  
SANYOG GUPTA  
(Applicant)

Accepted subject to the terms regarding fees

**CS Nitesh**

Company Secretary in Practice  
M. No.: F11360 | C.P. No: 19507

To

The Registrar of Trade Marks  
The Office of the Trade Marks Registry  
New Delhi





17499  
10/10/20



Sayaji Singh R. Gupta

24/8/22

Advocate  
Distt. Court Gurugram

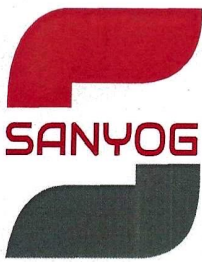


ATTESTED  
Y. J. Tanwar  
Advocate  
Distt. Court, Gurugram

24 AUG 2022

Sayaji





travel  
hotels  
tours

**A Complete Destination Management Company**

### NO OBJECTION CERTIFICATE

I, SANYOG GUPTA S/o Radhey Kishan Gupta give my consent as a proprietor of SANYOG GUPTA VOYAGES be and is hereby accorded for giving permission and no objection to proposed company named "**SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED**" to use the first word of company named "**SANYOG GUPTA**" and proprietor give consent to use first word "**SANYOG GUPTA**" in name of their proposed name "**SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED**". Also, proprietor on the behalf of "**SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED**" give their consent to use word "**SANYOG GUPTA**" as a first word in proposed name of **SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED** without any terms & conditions and time barred.

I, SANYOG GUPTA is the right owner of the word SANYOG GUPTA registered as a trademark under class 39 for the object of tour and travel operator and give my free consent to the proposed company named **SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED** to use the words for formation of company on MCA for registered under Companies Act 2013.

For: **SANYOG GUPTA VOYAGES**

For SANYOG GUPTA VOYAGES



Proprietor

**SANYOG GUPTA**  
PROPRIETOR

Date: 31.08.2022  
Place: Gurgaon

**Charity Tours**  
It's a Challenge

charity-tours.com

**IMEC INDIA**  
Incentive • Meeting • Exhibition • Conference

imecindia.com

**Opulent India Asia**  
creating luxury travel

opulentindiasia.com

**Aditure Himalayas**  
EXPEDITION [LIVE]

aditurehimalayas.com



आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

AIPPG9830K

31122018

नाम / Name  
SANYOG GUPTA

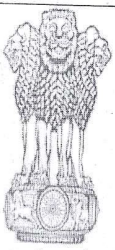
पिता का नाम / Father's Name  
RADHEY KISHAN GUPTA

जन्म की तारीख /  
Date of Birth  
13/07/1986

हस्ताक्षर / Signature

Sanyog Gupta  
31/08/2022





# Form No. DIR-3 KYC (Web)

Form language

☒ English

☐ Hindi

## Verify Director's KYC Details

[Pursuant to Rule 12A of The Companies  
(Appointment and Qualification of Directors) Rules, 2014]

सत्यमेव जयते

Refer instruction kit for filing the form

All fields marked in \* are mandatory

### User Verification

1 \*DIN of director

01259849

2(a) \*Personal Mobile Number

+91\*\*\*\*\*33

\*Enter OTP for Mobile Number

6020

☐ \*Personal Email ID

sa\*\*\*\*\*il.com

\*Enter OTP for email-ID

9629

### User details

3 \*Director's Name

SANYOG GUPTA

4 \*Father's Name

RADHEY KISHAN GUPTA

5 \*Citizen of India

☒ Yes ☐ No

6 \*Nationality

Indian

7 ☐ Resident of India

☒ Yes ☐ No

8 \*Date of Birth (DD/MM/YYYY)

13/07/1986

9 \*Gender

Male

10 Income Tax PAN

AIPPG9830K

11 Aadhaar Number

600008849689

12 Voter's Identity Card Number

13 Passport Number

0000Z2733868



14 Driving License Number

15 \*Permanent Residential Address

C-1054-I, Sushant Lok,  
Phase-1 Near Mother  
dairy, galleria DLF-  
IV, Gurgaon, Haryana, Ind  
ia 122009

16 \*Present Residential Address

C-1054-I, Sushant Lok,  
Phase-1 Near Mother  
dairy, galleria DLF-  
IV, Gurgaon, Haryana, Ind  
ia 122009

**Confirmation**

☒ \*I, accept and confirm that the particulars given herein above are true, correct, and complete.





C-11 Regd. with a.d.

**Sub-Regional Office**  
**EMPLOYEES' STATE INSURANCE CORPORATION**  
Plot No. 47, Sector - 34, Gurgaon (Haryana) -122001

Dated : 8/9/2022

To  
M/s.SANYOG GUPTA VOYAGES (OPC) PRIVATE LIMITED

SCO F-83/22  
GURUGRAM  
GURUGRAM,122017

**Subject:- Implementation of the E.S.I. Act, 1948 and Registration of Employees of the Factories and Establishments under Section 1(5) of the Act, as amended.**

Dear Sir(s),

1. It is informed that under section 1(3) of the esi. act, 1948 is applicable to all factories/establishments covered under the act within the area where your factory/establishment is situated
2. It is further informed that the appropriate government has extended the provisions of the act to other establishments under section 1(5) of the act in this area
3. Under section 2 a of the act such a factory/establishment is required to register itself under the act and chapter iv thereof casts a responsibility on the principal employer thereof to get his employees registered and pay contributions in respect of these employees covered under the act.
4. On the basis of the particulars in respect of your factory/establishment submitted by you, the report of the inspection conducted by the Social Security Officer, who inspected your establishment on -NA-, your establishment falls within the purview of Section 1(5) of the Act with effect from 08-09-2022. In case, however, subsequent facts reveal that your establishment was coverable from a date prior to the date mentioned above, you shall make yourself liable to comply with the provisions of the Act from such earlier date.
5. It is requested to take immediate steps for registration of your employees by submitting declaration forms online, payment of contribution, maintenance of records etc. from the date of coverage of your factory/establishment under the act. \*\*You are also requested to submit employer's registration form (form 01) as required under the provisions of sec.2-a of the esi act , 1948 read with regulation 10-b of the esi(general), regulations, 1950.
6. For the sake of convenience your establishment has been allotted code No **69000799720000999** which may kindly be used in all communications sent to this office and on all forms at the place indicated for the purpose. The Branch Office of the Corporation situated at **H.NO.421/7/15, Civil Lines, Near Rajiv Chowk, Gurgaon-122001** has been instructed to render necessary assistance to you in connection with registration of your employees. In case you find any difficulty or for any other purpose which may be necessary in connection with the Scheme you are requested to contact the Manager of the above Branch Office who will render necessary help in the matter.
7. A State wise list of ESI Dispensaries is available on our website [www.esic.nic.in](http://www.esic.nic.in) under the link Directories which can be downloaded. It is requested that publicity may be given about the Employees' State Insurance Dispensaries to enable your employees to choose their E.S.I. Dispensaries

8. The corporation officials would be pleased to give all necessary and possible guidance to you in discharging your duties and obligations under the esi act, 1948 and I am confident of prompt and timely compliance under the provisions of the ESI act and regulations on your part.
9. All the Branches of State Bank of India are authorized to accept the ESI Contribution .
10. The brochures/leaflets containing benefits available under the scheme and obligation of the employer etc are available on our website [www.esic.nic.in](http://www.esic.nic.in) under the link Publications which may be downloaded for wide publicity for the smooth functioning of the scheme
11. Please indicate your code no. on all correspondences to avoid delay

Yours faithfully,

Asstt./Dy. Director

Encl. : As state above

Copy for information and necessary action to:

Name of the principal employer :

No. of employees

0

ENSURE - TO INSURE ALL ELIGIBLE WORKERS WITH ESI FOR TOTAL SOCIAL SECURITY



# FORM NO. INC-3

[Pursuant to section 3(1) of the Companies Act, 2013 and pursuant to Rule 4(2), (3), (4), (5) & (6) of the Companies (Incorporation) Rules, 2014]



सत्यमेव जयते

## One Person Company - Nominee Consent Form

Form language ☒ English ☐ Hindi

Refer the instruction kit for filing the form.

1. (a) \*SRN of **run** (In case of new company) or Corporate Identity Number (CIN) of the company (In case of existing company)

(b) Global location number (GLN)

2. (a) Name of the One Person Company

SANYOG GUPTA VOYAGES(OPC) PRIVATE LIMITED

3. \* Consent

I **RADHEY KISHAN GUPTA**

hereby give my consent to become the member of

**SANYOG GUPTA VOYAGES(OPC)**

in the event of death of **SANYOG GUPTA**

subscriber/member of the company or his incapacity to contract.

4. Particulars of the nominee

Director Identification number(DIN)

Pre-Fill

\*Income-tax permanent account number (PAN) **ADUPG5595M**

Verify Details

\*First Name **RADHEY**

Middle Name **KISHAN**

\*Surname **GUPTA**

Family Name

\* ☒ Father's Name ☐ Mother's Name ☐ Spouse's name

**OM PRAKASH GUPTA**

\*Gender ☒ Male ☐ Female ☐ Transgender

\*Date of Birth **15/05/1953**

\*Nationality **IN**

\*Place of Birth (District and State) **DELHI**

\*Educational Qualification **X/SSLC/Junior/Equivalent**

\*Occupation type

☒ Self-employed

☐ Professional

☐ Homemaker

☐ Student

☐ Serviceman

Area of occupation

**BUSINESS**

*Radhey Gupta*

**Permanent Residential Address**

\*Line I S/O OM PRAKASH GUPTA, C-1054 I, SHUSHANT LOK, PHASE 1  
Line II NEW MOTHER DAIRY  
\*City GURGAON \*Pin code 122009  
\*State/Union Territory Haryana-HR  
ISO Country Code IN  
Country INDIA  
\*Phone (with STD/ISD Code) 0124 - 9910055661  
Mobile (with country code) +91 - 9910055661 Fax  
\*email id accounts@sgvoyages.com  
\*Whether present address is same as the permanent address ☒ Yes ☐ No

**Present Address**

\*Line I S/O OM PRAKASH GUPTA, C-1054 I, SHUSHANT LOK, PHASE 1  
Line II NEW MOTHER DAIRY  
\*City GURGAON \*Pin code 122009  
\*State/Union Territory Haryana-HR  
\*ISO Country Code IN  
Country INDIA  
\*Phone (with STD/ISD Code) 0124 - 9910055661  
Mobile (with country code) +91 - 9910055661 Fax  
email id accounts@sgvoyages.com  
\*Duration of stay at the present address 8 year(s) 6 month(s)  
If duration of stay at present address is less than one year then address of previous residence

\*Proof of Identity Aadhar Number

\*Residential Proof Bank Statement

**Declaration**

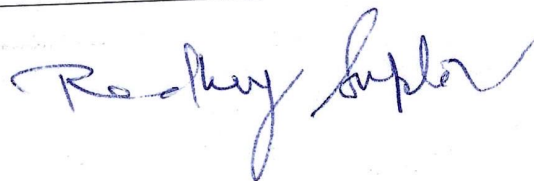
I do solemnly declare that I am an Indian citizen and resident in India and I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law or LLP Act in the last five years. I further declare that I am not a nominee in any other One Person Company and I shall comply with the eligibility criteria specified in Rule 3(3) within the prescribed period. I understand that the person nominating me may withdraw my nomination without my consent.

**To be physically signed by**

Nominee RADHEY KISHAN GUPTA

\*Date 18-08-2022

\*Place GURUGRAM





## Enclosures

1. Copy of PAN Card
2. Proof of identity
3. Residential Proof

Modify

Check Form

**Note :** Attention is drawn to provisions of section 7(5) and 7(6) which inter-alia, provides that furnishing of any false or incorrect particulars of any information or suppression of any material information shall attract punishment for fraud under section 447. Attention is also drawn to provisions of section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.

**This is a non e-Form. User is required to fill the form electronically and duly signed copy should be attached with e-Form INC-2, INC-4 or INC-6, as the case may be.**

*Re-dheya Singh*