

GOVT OF MAHARASHTRA



Certificate No. 01

FORM 4 (See rule

CERTIFICATE OF REGISTRATION

Surrogacy Clinic
(To be issued in duplicate)

1. In exercise of the powers conferred under Section 12 (1) of the Surrogacy (Regulation) Act, 2021,

(47 of 2021), the Appropriate Authority: Medical Officer of HealthMunicipal Corporation Amravati Here by grants registration to the Surrogacy Clinic named

below for purposes of carrying out Surrogacy or surrogacy procedures as per the aforesaid

Act. For a period of Three Year's ending on 10-8-2026(a) Name and address of the Surrogacy Clinic: Dr. Manjushree M. BoobShubham Hiteeh HospitalDevarankar Nages Badnera Road Amravati(b) Type of institution (~~Government~~ / Private) and - N.A. -

2. This registration is granted subject to the aforesaid Act and Rules there under and Any Contravention

there of shall result in suspension or cancellation of this certificate of registration before

the expiry of the said period of Three years.3. Registration No. allotted MH/SC/2022/10238/SC/AMRAVATI/584. For renewed Certificate of Registration Only: 10-8-2026Period of validity of earlier Certificate of Registration from 11-8-2023 to 10-8-2026Date: 11-8-2023Place: Amravati

[Signature]
Signature, Name and Designation of
the Appropriate Authority
Medical Officer of Health
Municipal Corporation, Amravati

* Display one copy of this certificate at a conspicuous place at the place of business.
* Strike out whichever is not applicable or necessary