

## 288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	Company Number	०२८३ ४३	8-			
Co	ompany Name in full	SWALISGA	YOUNG	SINGLE	Homeress	ASO16CI
¥ F 2 8 8 E	3 0 1 9 <del>×</del>					
Resignation form	Date of resignation	Day Month	Year Gg			
	Resignation as director	as secr	etary	Please mark the ap is as a director and		
	NAME *Style / Title	mR		*Honours etc		
Please insert details as previously notified to Companies House.	Forename(s)	MICHOLAS	GEORGI	Ē		
	Surname	LINK				
If cessa	<sup>†</sup> Date of Birth tion is other than	Day Month 28 IO	Year 68			
		A serving direct	or, secretary e	etc must sign t	he form belo	w.
	Signed	Carell	wale	Date	25/8/9	9
* Voluntary details. † Directors only.	ı	(by a serving director / s	secretary / administ	rator / administrative	receiver / receiver	manager / receiver
Please give the telephone number a DX number ar the person Compar contact if there is ar	and, if available, nd Exchange of nies House should		Tel			
		DX number	number DX exchange			
A61 COMPAI Form revised March	*AXWXTJFR* 127		panies at: se, Crown Wa gistered in Eng se, 37 Castle	y, Cardiff, CF4 land and Wales Terrace, Edinb	3UZ DX 3 or urgh, EH1 2E	3050 Cardiff