

Please complete in typescript, or in bold black capitals.

288b

Resignation of director or secretary

	Company Number	3197850
Co * F 2 8 8 E	mpany Name in full	Able Consulting Series Gd.
Resignation form	Date of resignation Resignation as director	Day Month Year 3 05 06 Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Title	*Honours etc
Please insert details as previously notified to	Forename(s) Surname	MC FORMATIONS LIMITED
	[†] Date of Birth tion is other than ion, please state reason	Day Month Year
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A serving director, secretary etc must sign the form below.

Signed

Date

135.96

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.



Form revised March 1995

Voluntary details.
 Directors only.

Credit Reporting Services Limited
43a Whitchurch Road, Cardiff, CF4 3JN.

Tel 01222-521177

DX number 50760 DX exchange Cardiff 2

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh