

Please complete in typescript, or in bold black capitals.

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288b

Resignation of director or secretary

	Comp	any Number	34	-28196	<u> </u>								
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Resignation form	Date of resignation Resignation as director		Day	Month 2_	Year	·							
,				as sec	ropriat secreta	riate box. If resignation etary mark both boxes.							
	NAME	AME *Style / Title					*Honours e	tc					
Please insert details as previously		Forename(s)						<u> </u>					
notified to Companies Hous	se.	Surname	YORK PLACE COMPANY SECRETARIES LIMITED										
If cess	ation is oth	[†] Date of Birth er than	Day	Month	Year								
			A servi	ing direct	or, sec	•	etc must sig	ın th	e fori	m be	low.		
Voluntary details. Directors only.		Signed	<u> </u>	or end on bel ork Place Co ring director /	half of	0.718.18		ate		Z ·		• 9	
Please give the name, address, selephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.			YORK PLACE COMPANY SERVICES LIMITED										
			12 YORK PLACE LEEDS LS1 2DS										
			DX 26436 LEEDS 2										
	TEL: 0113 242 0222 FAX: 0113 242 5904												
THE WINDS TOOLS 13			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

DX 235 Edinburgh

for companies registered in Scotland