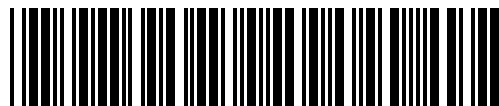




**Statement of satisfaction
in full or in part of charge**

Company Name: **CAPSTONE CARE LIMITED**

Company Number: **03469333**



Received for filing in Electronic Format on the: **09/04/2021**

XA21TRIQ

Details of Satisfaction

Charge created (or property acquired) on or after 6th April 2013.

Charge code: **0346 9333 0005**

Satisfaction of
charge: **In full**

Details of the person delivering this statement and their interest in the charge

Name: **O'NEILL PATIENT SOLICITORS LLP**

Address: **2 CHESTER ROAD STOCKPORT ENGLAND SK7 5NT**

Interest: **PRESENTER ACTING ON BEHALF OF COMPANY**

Authentication of Form

This form was authorised by: **a person with an interest in the registration of the charge.**