

Package: 'Laserform'  
by Laserform International Ltd.

# 49(8)(a)

Please complete in typescript,  
or in bold black capitals.

**Members' assent to company being re-registered as  
unlimited**

CHFP025

Company Number

04112012

Company Name in full

ALSTON LTD TRADING LTD

We, being all the members of the company, assent to the company being  
re-registered as unlimited

Member's name in full

ALSTON UK HOLDINGS LTD

Address

NEWBOLD ROAD

Post town

RUGBY

County / Region

WARWICKSHIRE

Postcode

CV21 2NH

Signature of member (or person lawfully  
authorised to sign on the member's  
behalf)

*Chris Thomas*

Date

29.3.04

Member's name in full

Address

Post town

County / Region

Postcode

Signature of member (or person lawfully  
authorised to sign on the member's  
behalf)

Date

Please enter in the box opposite the  
number of continuation sheets attached

0

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.

~~Present~~

~~3 Colmore Circus  
Birmingham  
B4 6DH~~

CHRIS THOMAS  
ALSTON LTD  
NEWBOLD RD  
RUGBY CV21 2NH

Tel 0121 200 1050

~~DX number 703167~~

~~DX exchange BIRMINGHAM 12~~

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

**Companies House, Crown Way, Cardiff, CF14 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**



LD1  
COMPANIES HOUSE  
31/03/04

Package: 'Laserform'  
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continuation sheet No   
Form Number 49(8)(a)

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or in bold black capitals.

CHFP025

**Members' assent to company being re-registered as  
unlimited (continuation)**

Company Number

Company Name in full

We, being all the members of the company, assent to the company being  
re-registered as unlimited

Member's name in full

Address

Post town

County / Region

Postcode

Signature of member (or person lawfully  
authorised to sign on the member's  
behalf)

Date

Member's name in full

Address

Post town

County / Region

Postcode

Signature of member (or person lawfully  
authorised to sign on the member's  
behalf)

Date

Member's name in full

Address

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authorised to sign on the member's  
behalf)

Date