

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

MYLOCALTY LIMITED	<u></u>
5858373	

Company name in full	5858313			
Shares allotted (including bonus shares):				
	From	То		
Date or period during which	Day Month Year	Day Month Year		
shares were allotted (If shares were allotted on one date enter that date in the "from" box)	0150112007			
Class of shares (ordinary or preference etc)	95DIPAA			
Number allotted	999			
Nominal value of each share	走1			
Amount (if any) paid or due on eac share (including any share premium)	ch ±1			
List the names and addresses of the allottees and the number of shares allotted to each overleaf				
If the allotted shares are fully or partly paid up otherwise than in cash please state:				
% that each share is to be treated as paid up				
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)				
	When you have completed ar the Registrar of Companies a			



COMPANIES HOUSE

Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 **Edinburgh**

Shareholder details	Shares and share c	lass allotted
Name	Class of shares	Number
MR. DAVID TRAVERS LOWEN	allotted	allotted
Address		
HI BATCHEE DRIVE, LEEDS	coeonaey	499
UK Postcode LS6 383		L
Name MARY BASIL HAMILTON ME ANALLY Address	Class of shares allotted	Number allotted
ATNERS STABLES LECKFORD	ORDINAY	200
STOCKBRIOGE"		<u> </u>
UK Postcode 50206JE	L	L
Name	Class of shares allotted	Number allotted
Address		
<u></u>		L
L	.	L
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
;		L
<u> </u>		L
UK Postcode	L	L
Name	Class of shares allotted	Number allotted
Address		
<u> </u>		L
<u> </u>	.	L
UK Postcode	<u> </u>	L
Please enter the number of continuation sheets (if any) attached to this	form	
Signed Da	te <u>09-01- 200</u>	7
A director / secretary / administrator / administrative receiver / receiver manager / rece	iver Please de	elete as appropriate

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.

J.C. FOSTER FCA M	chi CHARTERED ACCOUNTENT
77B BROADGATE da	DE HORSKORTH
LEEDS LEIB 500	1
DX number	DX exchange