



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

Company Name: **THE HUB COMMUNITY HEALTHCARE P FINANCE LIMITED**

Company Number: **07475730**



Received for filing in Electronic Format on the: **20/06/2022**

XB6KQ28A

Details of Satisfaction

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

Charge code: **0747 5730 0001**

Satisfaction of charge: **In full**

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

Name: **KATIE TAKEN**

Address: **KNIGHTS PLC THE BRAMPTON NEWCASTLE ENGLAND ST5 0QW**

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.**