



Companies House

CS01_(ef)

Confirmation Statement

Company Name: **Glan Yr Afon Inn (Dolphin) Limited**

Company Number: **08259722**



Received for filing in Electronic Format on the: **31/10/2023**

XCFBT2QA

Company Name: **Glan Yr Afon Inn (Dolphin) Limited**

Company Number: **08259722**

Confirmation **18/10/2023**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	2
Currency:	GBP	Aggregate nominal value:	2

Prescribed particulars

ON A SHOW OF HANDS EVERY MEMBER WHO IS PRESENT IN PERSON SHALL HAVE ONE VOTE AND, ON A POLL, EVERY MEMBER WHO IS PRESENT IN PERSON OR BY PROXY SHALL HAVE ONE VOTE FOR EVERY SHARE HELD BY HIM. DIVIDENDS MAY BE DECLARED AND PAID ACCORDING TO THE AMOUNTS PAID UP ON THE SHARES AND SHALL BE APPORTIONED AND PAID PRO RATA TO THE AMOUNTS PAID UP ON THE SHARES. NO DIVIDEND SHALL EXCEED THE AMOUNT RECOMMENDED BY THE DIRECTORS.

Class of Shares:	A	Number allotted	1
	ORDINARY	Aggregate nominal value:	1

Currency: **GBP**

Prescribed particulars

NON VOTING

Class of Shares:	B	Number allotted	1
	ORDINARY	Aggregate nominal value:	1

Currency: **GBP**

Prescribed particulars

NON VOTING

Class of Shares:	C	Number allotted	1
	ORDINARY	Aggregate nominal value:	1

Currency: **GBP**

Prescribed particulars

NON VOTING

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	5
		Total aggregate nominal value:	5

Total aggregate amount **0**
unpaid:

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor