



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

Company Name: **DAYSMITH HMO LIMITED**

Company Number: **10709192**



Received for filing in Electronic Format on the: **29/11/2023**

XCHCODKX

Details of Satisfaction

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

Charge code: **1070 9192 0001**

Satisfaction of
charge: **In full**

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

Name: **DANIEL SMITH**

Address: **19 WEST STREET WEST MALLING ENGLAND ME19 6QX**

Interest: **DIRECTOR OF CHARGOR**

Authentication of Form

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