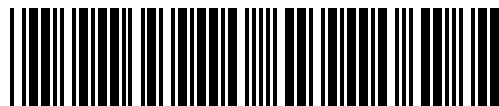




**Statement of satisfaction
in full or in part of charge**

Company Name: **MEDICAL SUPPLIES DIRECT LTD**

Company Number: **11616476**



Received for filing in Electronic Format on the: **08/02/2022**

XAXEGXEZ

Details of Satisfaction

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

Charge code: **1161 6476 0001**

Satisfaction of
charge: **In full**

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

Name: **NATIVE PLOT LIMITED**

Address: **EDMANS & CO EDMANS & CO LONDON UNITED KINGDOM WC1V 6BX**

Interest: **LENDER**

Authentication of Form

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