



Companies House

# CS01<sub>(ef)</sub>

## Confirmation Statement

Company Name: **MOSAIC HEALTH LTD**

Company Number: **12748409**



Received for filing in Electronic Format on the: **14/06/2023**

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Company Name: **MOSAIC HEALTH LTD**

Company Number: **12748409**

Confirmation **14/06/2023**

Statement date:

## Statement of Capital (Share Capital)

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<b>Class of Shares:</b>	<b>A</b>	Number allotted	<b>14703</b>
	<b>ORDINARY</b>	Aggregate nominal value:	<b>14.703</b>
Currency:	<b>GBP</b>		

Prescribed particulars

**THE A ORDINARY SHARES ARE ORDINARY SHARES THAT DO NOT CARRY ANY PRESENT OR FUTURE PREFERENTIAL RIGHT TO DIVIDENDS, TO THE COMPANY'S ASSETS ON A WINDING UP, OR TO BE REDEEMED IN PREFERENCE TO SHARES IN ANY OTHER CLASS OF SHARES. THEY HAVE ATTACHED TO THEM FULL VOTING RIGHTS AND FULL DIVIDEND RIGHTS. THEY DO NOT CONFER ANY RIGHTS OF REDEMPTION. THEY HAVE CAPITAL DISTRIBUTION RIGHTS LIMITED TO THE BETTER OF PARI PASSU NON PARTICIPATING RETURN OF CAPITAL RIGHTS (INCLUDING ON WINDING UP) AND PRO RATA RIGHTS IN PROPORTION TO THE TOTAL NUMBER OF ORDINARY SHARES.**

<b>Class of Shares:</b>	<b>ORDINARY</b>	Number allotted	<b>153055</b>
Currency:	<b>GBP</b>	Aggregate nominal value:	<b>153.055</b>

Prescribed particulars

**THE ORDINARY SHARES ARE ORDINARY SHARES THAT DO NOT CARRY ANY PRESENT OR FUTURE PREFERENTIAL RIGHT TO DIVIDENDS, TO THE COMPANY'S ASSETS ON A WINDING UP, OR TO BE REDEEMED IN PREFERENCE TO SHARES IN ANY OTHER CLASS OF SHARES. THEY HAVE ATTACHED TO THEM FULL VOTING RIGHTS AND FULL DIVIDEND RIGHTS. THEY DO NOT CONFER ANY RIGHTS OF REDEMPTION. THEY HAVE CAPITAL DISTRIBUTION RIGHTS LIMITED TO PRO RATA RIGHTS IN PROPORTION TO THE TOTAL NUMBER OF ORDINARY SHARES.**

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## Statement of Capital (Totals)

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Currency:	<b>GBP</b>	Total number of shares:	<b>167758</b>
		Total aggregate nominal value:	<b>167.758</b>
		Total aggregate amount	<b>0</b>
		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