

From:

11/01/2008 11:33 #036 P.002/005

BR6

CHFP010

This form should be completed in black.

This notice must be delivered to the Registrar within 21 days of the alteration being made.

Return of change of person authorised to accept service or to represent the branch of an overseas company or of any change in their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

Company Number

FC007227

Branch Number

BR000469

Company Name

CREDIT SUISSE

Branch Name

(If different to corporate name)

CREDIT SUISSE, LONDON BRANCH

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

Date of termination

Day Month Year

2 9 0 3 2 0 0 7

Position vacated
(Mark appropriate box(es))

☐

Person authorised to accept service on the company's behalf

☒

Person authorised to represent the company at the branch

Complete these details for resignation of any person authorised to accept service or process on the company's behalf or who was authorised to represent the company in relation to the business of the branch.

Name LEONARD HEINRICH FISCHER

Address FORSTERSTRASSE 34

ZURICH CH-8044

SWITZERLAND

To whom should Companies House direct any enquires about the information on this form.

MICHELLE HILL - LCD

CREDIT SUISSE

ONE CABOT SQUARE

LONDON E14 4QJ

Tel:



LD5

"L971PO03"
13/04/2007
COMPANIES HOUSE

288

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When completed, this form should be delivered to the address on page 4

APPOINTMENT

Persons authorised to represent the company or who may accept service or process

Give the name and address of the person appointed, together with the date of appointment. Mark the box(es) relevant to the appointment. If the appointment is to both positions mark both boxes.

* Delete as appropriate

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned.

Mark box(es) as appropriate

*Style/Title	MR
Forenames	MICHAEL
Surname	PHILIPP
Address	22 HERTFORD STREET
Post town	LONDON
County/Region	
Postcode	W1J 7RJ

☐ Is authorised to accept service of process on the company's behalf

***AND/OR**

☒ Is authorised to represent the company in relation to that business

Date of appointment

Day	Month	Year
2	9	0
3	2	0
	0	7

The authority to represent the company is:-

Is # ☐ Authorised to accept service of process on the company's behalf

***AND/OR**

Is # ☒ Authorised to represent the company in relation to that business

The extent of the authority to represent the company is:- (give details)

In accordance with the scope of the resolution at

appointment of the Company.

These powers:-

☒ May be exercised alone

OR

☐ Must be exercised with:-
(Give name(s) of co-authorised person(s))

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CHANGE OF PARTICULARS

Mark the appropriate box. If change relates to both positions, mark both boxes.

Change of name

Name previously notified to Companies House

New name

Change of residential address
(enter new address)**Change of authority to act**

(this part does not apply to a person authorised to accept service on behalf of the company)

Give brief particulars of any change in the authority of the officer to represent the company, including any alteration to the manner in which the existing or new powers may be exercised (e.g. requiring them to be exercised with other persons)

Mark appropriate box

Signature

* Delete as applicable

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Date of change

Day	Month	Year

☐ Change of particulars of person authorised to accept service

☐ Change of particulars of person authorised to represent the company

Forenames _____

Surname _____

Forenames _____

Surname _____

Address _____

Post town _____

County/Region _____ Postcode _____

Country _____

The extent of the authority of the above person to represent the company has been altered to :- [give details]

In accordance with the scope of the resolution at
appointment of the Company.

The powers:-

☐ May be exercised alone

OR

☐ Must be exercised with:- (Give name(s) of co-authorised person(s))

Signed _____

* (Director / Secretary / Permanent representative)

Date

29.3.07

From:

11/01/2008 11:33 #036 P.005/005

Form BR6

When completed, this form should be delivered to:-

For branches registered in England and Wales

The Registrar of Companies
Companies House
Crown Way
Cardiff
CF14 3UZ

For branches registered in Scotland

The Registrar of Companies
Companies House
37 Castle Terrace
Edinburgh
EH1 2EB

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