

BR6

CHWP000

This form should be completed in black.

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

Company number

Company name

Branch name (if different to corporate name)

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

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

Burberry Jersey (No.2) Limited	ber 006597 CR 6590
Burberry Jersey (No.2) Limited	

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

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.

	Day Month Year	
Date of termination	2 1 0 8 2 0 0 6	
Position vacated (Mark appropriate box(es))	Person authorised to accept service on the company's behalf	
	Person authorised to represent the con at the branch	npan

VIIJEW	_{dress} 154 ELSLEY ROAD,

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

(10/03)

LEGAL DE	EPARTMENT	, 58-59 HAYN	//ARKET, L	ONDON, S	W1Y 4BL
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When completed, this form should be delivered to the address on page 4



APPOINTMENT Persons authorised to represent the company * Style / Title MS or who may accept service or process CAROL Forenames Give the name and address of the person appointed, together with the **FAIRWEATHER** Surname date of appointment. Mark the box(es) relevant to the appointment. **8 FANTHORPE STREET** If the appointment is to both positions Address ** mark both boxes. ^{††} Tick this box if the address shown is a LONDON service address for Post town the beneficiary of a Postcode SW15 1DW **Confidentiality Order** County / Region granted under the provisions of section 723B of the Is authorised to accept service of process on the company's behalf Companies Act 1985 * AND/OR Is authorised to represent the company in relation to that business Day Month Year * Delete as appropriate Date of appointment 0 8 0,0, The authority to represent the company is :-SCOPE OF AUTHORITY ls # 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) Give brief particulars of the extent AS OUTLINED IN THE COMPANY'S ARTICLES OF ASSOCIATION 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 These powers :-# 🗸 May be exercised alone OR Must be exercised with :-(Give name(s) of co-authorised person(s))

CHANGE OF PARTICULARS	Day Month Year
i AICHOGEAIN	Date of
Mark the appropriate box. If change relates to both positions, mark both boxes.	Change of particulars of person authorised to accept service Change of particulars of person authorised to represent the company
Change Name previously of name notified to	Forenames
Companies House	Surname
New name ◀	Forenames
L	Surname
Change of residential address ^{††} (enter new address)	Address
**Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order	Post town
granted under the provisions of section	County / Region Postcode
723B of the Companies Act 1985	Country
Change of authority to act	
(this part does not apply to a person authorised to accept service on behalf of the company)	The extent of the authority of the above person to represent the company has been altered to :- [give details]
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)	The powers :- #
# Mark appropriate box	# Must be exercised with : (Give name(s) of co-authorised person(s))
Signature	
	Signed * (director / Secretary
* Delete as applicable	