# 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.

**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)

FC025524	Branch Number	BR007822	
Portelet Investme	ents Limited	_	
<u> </u>			

### **TERMINATION OF AUTHORITY**

See overleaf for appointments and

change of particulars

Date of termination

Position vacated (Mark appropriate box(es))

Day Month Year
2 | 9 | 0 | 9 | 2 | 0 | 0 | 6

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 Declan Patrick Harney

Address 49 Baring Road, Beaconsfield

Buckinghamshire

HP9 2NF

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

Jaya Bergamin

Associated British Foods plc, Group Secretarial

Department, Ground Floor, 50/51 Russell Square

London WC1B 4JA Tel: 02072993625

When completed, this form shor





COMPANIES HOUSE

**COMPANIES HOUSE** 

565 20/10/2006

\*AU075JC1\*

108 03/10/2006

#### **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	Mrs
Forenames	Rosalyn Sharon
Surname	Mendelsohn
Address	45 Oakleigh Park South
Post town	London
County/Region	Postcode N20 9JR
Is authoris	sed to accept service of process on the company's behalf
*AND/OR	
Is authoris	sed to represent the company in relation to that business
Date of appointn	nent 2 9 0 9 2 0 0 6
The authority to	represent the company is:-
Is # Autho	orised to accept service of process on the company's behalf
*AND/OR	
Is # Author	prised to represent the company in relation to that business
The extent of the	authority to represent the company is:- (give details)
"The busine	ss of the Company shall be managed by the Directors
who may exe	rcise all such powers of the Company as are not by the
Law or thes	e Articles required to be exercised by the Company in
general mee	ting. If there shall be only 1 Director the business
of the Comp	any shall be managed by the Sole Director".
These powers:-	
	be exercised alone
OR // Must	be exercised with:-
"the authori	(Give name(s) of co-authorised person(s))  Lty of the board".
	· <del>·</del>
	<del></del>



CHANGE OF						
PARTICULARS		Day	Month	,	Year	
	Date of change	1	,			
Mark the appropriate box. If change relates to both positions, mark both boxes.	Change of particulars of person authorised to represent the company					
Change of name						
Name previously notified to ◀ Companies House	Commons	<u>-</u>	•			
					_	
New name 🗸						
Change of residential address (enter new address)	Addross				_	
	Post town					
	County/Region					Postcode
Change of authority to act						resent the company has been altered
(this part does not apply to a person authorised to accept service on behalf of the company)	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)  # Mark appropriate box	The powers:-  #			Give na	ame(s) c	of co-authorised person(s))
Signature						
* Delete as applicable	Signed		liber	<u>~~</u>	~	
	Date		2	9 -	•	Pirector / Se <del>cretary / Permanent representitive)</del>
coform						