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)

FC026275	Branch Number	BR008431
Bonuit Investment	s 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 19 0 19 2 10 10 16

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 for



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COMPANIES HOUSE

107 03/10/2006

20/10/2006

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
7.001000	
Post town	London
County/Region	Postcode N20 9JR
Is authoris	sed to accept service of process on the company's behalf
*AND/OR	
	sed to represent the company in relation to that business
	Day Month Year
Date of appointm	nent 2 9 0 9 2 0 0 6
The authority to u	represent the company is:-
is # 🚺 Autho	orised to accept service of process on the company's behalf
*AND/OR	
Is # Autho	orised 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 these	e Articles required to be exercised by the Company in
general meet	ting. If there shall be only 1 Director the business
of the Compa	any shall be managed by the Sole Director".
These powers:-	
# May b	pe exercised alone
OR	
# Wust	be exercised with:-
"the authori	(Give name(s) of co-authorised person(s)) ty of the board".



CHANGE OF	
PARTICULARS	Day Month Year
	Date of change
Mark the appropriate box. If change relates to both positions, mark both boxes. Change of name	Change of particulars of person authorised to accept service Change of particulars of person authorised to represent the company
Name previously notified to ◀ Companies House	Forenames Surname
New name	Forenames Surname
Change of residential address (enter new address)	Address
	Post town Postcode
Change of authority to act	Country The extent of the authority of the above person to represent the company has been altered to :- [give details]
(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)	The powers:- #
# Mark appropriate box	
Signature * Delete as applicable	Signed *(Director / Segretary / Permanent representitive)
coform	Date