

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)

FC028606	Branch Number	BR010194
Aspet Nouveau Inve	estments Limited	
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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			1 1 1	
Position vacated (Mark appropriate box(es))		on the com Person aut	horised to accept pany's behalf horised to represe the branch	
Name Address				
Address				

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.

A18 2

21/05/2009 COMPANIES HOUSE Nicola Marsh, Barclays Coporate Secretariat,

Level 29, 1 Churchill Place, London, E14 5HP

Tel: 020 7116 1000

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

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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.

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

* 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	
Forenames	Elke
Surname	Edis
Address ††	1 Churchill Place
Post town	London
County/Region	Postcode E14 5HP
Is authoris	sed to accept service of process on the company's behalf
✓ Is authoris	
Is # Auth	represent the company is:- orised to accept service of process on the company's behalf orised to represent the company in relation to that business
The extent of the	e authority to represent the company is:- (give details) by the constitutional document of the Company.
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 Date of change
Mark the appropriate box. If change relates to both positions, mark both boxes.	Change of particulars of person authorised to accept service
Change of name	Change of particulars of person authorised to represent the company
Name previously	Forenames
notified to ◀ Companies House	Surname
New name	Forenames
	Surname
Change of residential address †† (enter new address)	Address
†† Tick this box if the address shown is a	Past town
service address for the beneficiary of a Confidentiality Order	County/Region Postcode
granted under the provisions of section 723B of the	Country
Companies Act 1985	The extent of the authority of the above person to represent the company has been altered to :- [give details]
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	The powers:-
represent the company, including any alteration to	# May be exercised alone
the manner in which the existing or new powers	OR /
may be exercised (e.g. requiring them to be	# Must be exercised with:- (Give name(s) of co-authorised person(s))
exercised with other	
persons) # Mark appropriate box	
, ment appropriate sex	
Signature	
* Delete as applicable	Signed For and on behalf of Barcosec Limited
очете во аррпсасте	-(Director / Secretary / Permanent representitive)
	Date 1450

