



Companies House

# LLCS01 (ef)

## Confirmation Statement

Company Name: **ONE MEDICARE T/A ONE PRIMARY CARE LLP**

Company Number: **OC324255**



Received for filing in Electronic Format on the: **20/03/2024**

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LLP name in full: **ONE MEDICARE T/A ONE PRIMARY CARE LLP**

LLP Number: **OC324255**

Confirmation **20/03/2024**

Statement date:

The Limited Liability Partnership confirms that its intended future activities are lawful.

## **Confirmation Statement**

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

# Authorisation

Authenticated

This form was authorised by one of the following:

Designated member, Judicial Factor.