

## BR6

CHFP025

Please complete in typescript, or in bold black capitals.

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)

FC012671	Branch number	BR 956
ANDREW AG		
ANDREW LTD		

## **TERMINATION OF AUTHORITY**

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.

See overleaf for appointments and change of particulars

	Day	Month	Year	
Date of termination				
Position vacated (Mark appropriate box(es))		on the comp	orised to acc any's behalf orised to rep	•
Name				
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

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08/03/2007 A09 COMPANIES HOUSE

aserrorm International 6/05

Bond Pearce LLP

Darwin House, Southernhay Gardens, Exeter, EX1 1LA

Tel 0845 415 0000

DX number

DX exchange

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for branches registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

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for branches registered in Scotland

DX 235 Edinburgh or LP - 4 Edinburgh 2

## 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.

tf 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

* <b>Style</b> / Title	mr
Forenames	MARK ALAN
Surname	OLSON
Address #	3 WESTREOOK CORPORATE CENTER SUITE 900
Post town	WESTCHESTER, IL
	on USA Postcode 60154
Date of appoi	Day Month Year  orange of 2 or 3 2 or 5 7
The authority	to represent the company is :-
*AND/OR  * Is an  The extent of  This pe  Business  All For  Has The  Financia	ALL CONTRACTS AND BELEGATE ANY OF THE POWERS.
# May	ers :-  / be exercised alone
OR # Mus	st be exercised with :-  (Give name(s) of co-authorised person(s))

CHANGE OF			
PARTICULARS	Day Month Year		
Mark the appropriate	Date of change		
box. If change relates to both positions, mark	Change of particulars of person authorised to accept service		
both boxes.	Change of particulars of person authorised to represent the company		
Name previously	Forenames		
notified to Companies House	Surname		
Change of name	Forenames		
	Surname		
Change of residential address the (enter new address)	Address		
th Tick this box if the address shown is a sporter address for	Post town		
service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985	County / Region Postcode		
	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	# May be exercised alone OR # Must be exercised with : (Give name(s) of co-authorised person(s))		
Signature	Signed Marle (director topograph representative)		
* Delete as applicable	Signed Warle *(director Asserted & Thermanent representative)  Date MARCH 5 2007		