



Companies House
for the record

BR6

CHFP000

This form should be completed in black.
This notice must be delivered to the Registrar within 21 days of the alteration being made.

Return of change of person authorised to accept service or to represent the branch of an overseas company or of any change in their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

Company number

FC018046

Branch number

BR002521

Company name

SCHEDULED AIRLINES TRAFFIC OFFICES, INC.

Branch name
(if different to corporate name)

SATOTRAVEL

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

Date of termination

Day Month Year

--	--	--	--	--	--	--	--	--	--

Position vacated
(Mark appropriate box(es))

- ☐ 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

Address

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

HOGAN & HARTSON

ONE ANGEL COURT

LONDON EC2R 7HJ

ATTN: SUSAN NAMKUNG

Tel. 020 7367 0200



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

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 _____

Forenames _____

Surname _____

Address _____

Post town _____

County / Region _____

Postcode _____

☐ Is authorised to accept service of process on the company's behalf

* AND/OR

☐ Is authorised to represent the company in relation to that business

Date of appointment

Day	Month	Year

The authority to represent the company is :-

Is # ☐ Authorised to accept service of process on the company's behalf

* AND/OR

Is # ☐ Authorised to represent the company in relation to that business

The extent of the authority to represent the company is :- (give details)

These powers :-

☐ May be exercised alone

OR

☐ Must be exercised with :-

(Give name(s) of co-authorised person(s))

CHANGE OF PARTICULARS

Mark the appropriate box. If change relates to both positions, mark both boxes.

Change of name

Name previously notified to Companies House

New name

Change of residential address (enter new address)

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 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

Signature

* Delete as applicable

Date of change		Day	Month	Year
		0	1	2 0 0 1
<input type="checkbox"/>	Change of particulars of person authorised to accept service			
<input checked="" type="checkbox"/>	Change of particulars of person authorised to represent the company			
Forenames	LINDA			
Surname	CAINE			
Forenames				
Surname				
Address				
Post town				
County / Region			Postcode	
Country				
The extent of the authority of the above person to represent the company has been altered to :- [give details]				
MANAGE DAY-TO-DAY OPERATIONS OF BRANCHES IN				
ENGLAND AND WALES UNDER U.S. NAVY, AIRFORCE, ARMY				
AND COMMERCIAL CONTRACTS; PROVIDED THAT SIGNIFICANT				
BUSINESS DECISIONS, ACTIONS, OR COMMITMENTS WOULD				
REQUIRE EXPRESS AUTHORITY FROM AN APPROPRIATE				
DIRECTOR OF THE COMPANY.				
The powers :-				
#	<input type="checkbox"/>	May be exercised alone		
OR				
#	<input type="checkbox"/>	Must be exercised with : (Give name(s) of co-authorised person(s))		

Signed

Steven G. Hing

* (director / Secretary / Permanent represent)

Date

11 JANUARY 2002