In accordance with Section 1046 of the Companies Act 2006 & Regulation 13 of the Overseas Companies Regulations 2009

OS AP01

Appointment of director of an overseas company



What this form is for
You may use this form to appoint
an individual as a director of an
overseas company.

What this form is NOT for
You cannot use the form to apple
a corporate director of an overse
company To do this, please use
OS APO2 'Appointment of corporate director of an overseas company



A13 20/01/2015
COMPANIES HOUSE

#221

		COMPANIES HOUSE				
1	Overseas company details					
Company number	F C 0 2 5 7 4 7	Filling in this form Please complete in typescript or in				
Company name in full	DEUTSCHE POSTBANK AG	bold black capitals.				
or alternative name as registered in the UK		All fields are mandatory unless specified or indicated by *				
2	Date of director's appointment					
Date of appointment	d 0 d 1 m 1 m 1 y 2 y 0 y 1 y 4					
3	New director's details					
Title*	DR	• Former name(s) Please provide any previous names				
Full forename(s)	RALPH	which have been used for business purposes in the past 20 years.				
Surname	MULLER	Married women do not need to give				
Former name(s) •		former names unless previously used for business purposes.				
Country/State of residence	GERMANY	Continue in Section 8 if required.				
Nationality	GERMAN	O Country/State of residence This is in respect of your usual				
Date of birth	d 1 d 9 0 5 7 1 7 9 7 7 7 1	residential address as stated in Section 4a				
Business occupation (if any) [©]	CHIEF OPERATING OFFICER	Business occupation If you have a business occupation, please enter here. If you do not, please leave blank				
4	New director's service address ^o					
	Please complete your service address below You must also complete your usual residential address in Section 4a	O Service address This is the address that will appear on the public record This does not				
Building name/number		have to be your usual residential address.				
Street	FRIEDRICH-EBERT-ALLEE 114-126	If you provide your residential				
		address here it will appear on the public record				
Post town	BONN	, ,				
County/Region						
Postcode	5 3 1 1 3					
Country	GERMANY					

OS AP01

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5	Director's authority										
	Please enter the extent of your authority as director. Please tick one box				• If you have indicated that the extent						
Extent of authority					of your authority is limited, please provide a brief description of the limited authority in the box below If you have indicated that you are not authorised to act alone but only						
Description of limited authority, if applicable					please son(s)	enter with v	the na whom	ame(s)	of		
authority, it applicable	Are you authorised to act alone or jointly? Please tick one box				sed to	act b	elow				
	☑ Alone☑ Jointly ❷										
If applicable, name(s) of person(s) with whom you are acting jointly											
6	UK establishments										
	A return must be delivered in respect of any alteration to the company particulars by each UK establishment. If, however, a company has more than UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below	one									
	UK establishment name	Regi	stration number								
				_							
						<u> </u>	<u> </u>		<u> </u>		
				 	 		_	}	_		
7	Signature	_	1	!	<u> </u>	<u> </u>		<u> </u>	<u> </u>		
Signature	Signature X	X									
	This form may be signed and authorised by Director, Secretary, Permanent representative										
8	Additional former name(s) (continued from Section 3)		_				_				
Former name(s) •			O Additional former names Use this space to enter any additional names.								

OS AP01

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Presenter information	Important information					
You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form The contact information you give will be visible to searchers of the public record	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.					
Contact name MR MICHAEL LAMIN	™ Where to send					
Company name DEUTSCHE POSTBANK AG	You may return this form to any Companies House address:					
Address 61 QUEEN STREET	England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff.					
Post town LONDON County/Region Postcode E C 4 R 1 A F	Scotland: The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post)					
DX Telephone	Northern Ireland. The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG DX 481 N R Belfast 1					
We may return forms completed incorrectly or with information missing Please make sure you have remembered the following:	Higher protection If you are applying for, or have been granted, higher protection, please post this whole form to the different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE					
☐ The company name and number as registered in the UK match the information held on the public Register	1 Further information					
 You have completed the date of appointment You have included all former names used for business purposes over the last 20 years You have completed the nationality box in Section 3 	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk					
☐ You have provided a correct date of birth ☐ You have provided a business occupation if there is one ☐ You have provided both the service address and the	This form is available in an alternative format. Please visit the					
usual residential address Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number.	forms page on the website at www.companieshouse.gov.uk					
☐ You have enclosed a relevant higher protection application if applying for this at the same time as completing this form						
 ☐ You have entered the extent of the director's authority in Section 6 ☐ You have completed Section 6, if applicable ☐ You have signed the form 						