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Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	Company Numb	er 146263
SCT *SM	ABPNY* 214	UNCHAINED ROUBESIONS PLC
Resignation form	Date of resignatio	Please mark the appropriate box. If reciprostice
	NAME *Style / Title	*Honours etc
Please insert details as previously notified to Companies House	Forename(s	
	Surname	Nou Cleek & Murray
	[†] Date of Birth tion is other than ion, please state reason	
* Voluntary details. † Directors only.	Signed	A serving director, secretary etc must sign the form below. Date 310896 (by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver
Please give the natelephone number as a DX number and the person Companicontact if there is any	and, if available, d Exchange of es House should	PARK CIRCUS (MANAGEMENT) LIMITED 6 P OUS PLACE G OV GS OUN Tel TEL 041 332 2014 DX number DX exchange
Form revised March 1	995	When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh