

Please complete in typescript, or in bold black capitals.

288b

Resignation of director or secretary

	Company Number ompany Name in full 3 0 1 9 *	3103400	ines .
Resignation form	Date of resignation Resignation as director	Day Month Year 13 10 95 V as secretary	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
Please insert details as previously notified to Companies House.	NAME *Style / Title Forename(s) Surname	MR GRAEME LYON CAMPBELL	*Honours etc
	†Date of Birth tion is other than ion, please state reason	Day Month Year O4 O3 S4	

* Voluntary details. † Directors only.

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.



Form revised March 1995

A serving director, secretary etc must sign the form below.

Signed	a Alland .
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Date

33/11/22

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver

S (MANAGEMENT) LIMITED US PLACE	
2014 Tel	
DX exchange	
	S (MANAGEMENT) LIMITED US PLACE 2014 Tel DX exchange

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