

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

4248841		
Linguamatics Limited		

Company name in full	Linguamatics Limited					
Shares allotted (including bonus shares):						
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From To Day Month Year Day Month Year 0 4 0 4 2 0 0 8					
Class of shares (ordinary or preference etc)	Ordinary					
Number allotted	10000					
Nominal value of each share	£0 0001					
Amount (if any) paid or due on eac share (including any share premium)	h £0 02					
List the names and addresses of the	e allottees and the number of shares allotted to each overleaf					
If the allotted shares are fully or partly paid up otherwise than in cash please state:						
% that each share is to be treated as paid up						
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)						



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

Companies House, Crown Way, Cardiff CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

DX 33050 Cardiff

For companies registered in England and Wales

For companies registered in Scotland

DX 235 Edinburgh

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted		
Name John Mark Brimacombe	Class of shares allotted	Number allotted	
Address Old School House, Stert, Devizes, Wiltshire	Ordinary	10000	
	_		
UK Postcode S N 1 0 3 J D			
Name	Class of shares allotted	Number allotted	
Address			
	_ -	<u> </u>	
UK Postcode しょしししし			
Name	Class of shares allotted	Number allotted	
Address		1 -	
		L	
UK Postcode	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
	_		
UK Postcode			
Please enter the number of continuation sheets (if any) attached to this	s form		
Signed	Date 17 Amil	2 o 0 \$ delete as appropriate	
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	Tel		

DX number

DX exchange