



**Statement of satisfaction
in full or in part of charge**

Company Name: **PARTNERSHIP OF CARE LIMITED**

Company Number: **04721898**



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XA9TK79V

Details of Satisfaction

Charge created (or property acquired) on or after 6th April 2013.

Charge code: **0472 1898 0013**

Satisfaction of
charge: **In full**

Details of the person delivering this statement and their interest in the charge

Name: **LOOSEMORES SOLICITORS**

Address: **ALLIANCE HOUSE 18-19 HIGH STREET CARDIFF WALES CF10 1PT**

Interest: **BORROWER'S SOLICITOR**

Authentication of Form

This form was authorised by: **a person with an interest in the registration of the charge.**