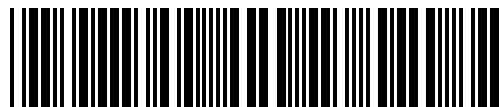




**Statement of satisfaction  
in full or in part of charge**

Company Name: **ROSE MEDICAL LIMITED**

Company Number: **06449864**



Received for filing in Electronic Format on the: **12/03/2024**

XCYQWC4W

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**Details of Satisfaction**

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

Charge code: **0644 9864 0004**

Satisfaction of  
charge: **In full**

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

Name: **PETER BURROWS**

Address: **VILLAGE PHARMACY CHAPEL LANE PRESTON ENGLAND PR4 4AA**

Interest: **CHARGOR**

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**Authentication of Form**

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