



Confirmation Statement

Company Name: **FORMOTION CLINICS LIMITED**

Company Number: **09481500**



Received for filing in Electronic Format on the: **13/03/2017**

X623OY0Y

Company Name: **FORMOTION CLINICS LIMITED**

Company Number: **09481500**

Confirmation **10/03/2017**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	B	Number allotted	1
	ORDINARY	Aggregate nominal value:	1
Currency:	GBP		

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES

Class of Shares:	C	Number allotted	1
	ORDINARY	Aggregate nominal value:	1
Currency:	GBP		

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES

Class of Shares:	ORD	Number allotted	1
Currency:	GBP	Aggregate nominal value:	1

Prescribed particulars

ONE SHARE EQUALS ONE VOTE, EACH HAVING RIGHTS TO DIVIDENDS. SO LONG AS THERE ARE NO RIGHTS ATTACHED TO SHARES ON WINDING-UP ETC OR REDEMPTION RIGHTS.

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	3
		Total aggregate nominal value:	3
		Total aggregate amount unpaid:	0

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **10/03/2017**

Name: **MR MATTHEW FLUX**

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1974**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 50% but less than 75% of the shares in the company.

Notification Details

Date that person became **10/03/2017**
registrable:

Name: **MRS NATASHA FLUX**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/01/1975**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor