

OS AP05

Appointment by an overseas company of a person
authorised to represent the company as a
permanent representative in respect of a
UK establishment



Companies House

☒ **What this form is for**
You may use this form to appoint
a person authorised to represent
the company in respect of the UK
establishment.

☐ **What this form is for**
You cannot use this form for
any other appointment.

WEDNESDAY



A28 *A7J6TJ0Q* 21/11/2018 #206
COMPANIES HOUSE

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1 Overseas company details

Company number F C 0 0 5 5 8 6

Company name in full
or alternative name as
registered in the UK DELTA AIR LINES, INC.

→ Filling in this form

Please complete in typescript or in
bold black capitals.

All fields are mandatory unless
specified or indicated by *

2 UK establishment details

UK establishment
number B R 0 0 1 2 4 6

UK establishment
name in full DELTA AIR LINES, INC.

3 Date of appointment of new person authorised

Date of appointment 2 0 1 1 2 0 1 8

4 Details of new person authorised

Title* Mr.

Full forename(s) Corneel

Surname Koster

Former name(s) ①

① Former name(s)

Please provide any previous names
which have been used for business
purposes in the past 20 years.

Married women do not need to give
former names unless previously used
for business purposes.

Continue in Section 8 if required.

5 Service address of new person authorised ②

Please complete the service address below. You must also complete the usual
residential address of the person authorised in **Section 5a**.

Building name/number Metro Building

Street 1 Butterwick

Post town Hammersmith, London

County/Region

Postcode W 6 8 D L

Country United Kingdom

② Service address

This is the address that will appear
on the public record. This does not
have to be your usual residential
address.

If you provide your residential
address here it will appear on the
public record.

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6	Authority of new person authorised
	Please enter the extent of your authority as person authorised. Please tick one box.
Extent of authority	☐ Limited ❶ ☒ Unlimited
Description of limited authority, if applicable	Are you authorised to act alone or jointly? Please tick one box. ☒ Alone ☐ Jointly ❷
If applicable, name(s) of person(s) with whom you are acting jointly	

❶ If you have indicated that the extent of your authority is limited, please provide a brief description of the limited authority in the box below.

❷ If you have indicated that you are not authorised to act alone but only jointly, please enter the name(s) of the person(s) with whom you are authorised to act below.

7	Signature
Signature	Signature X  X This form may be signed and authorised by: Director, Secretary, Permanent representative.

8	Additional former name(s) (continued from Section 4)
Former name(s) ❸	Cornelius Johan Albert Koster

❸ Additional former name(s)
Use this space to enter any additional names.

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Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name **Christina Burks**

Company name **Delta Air Lines, Inc.**

Address **1030 Delta Blvd**

Law Dept. 981

Post town **Atlanta**

County/Region

Postcode

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Country **United States of America**

DX **christina.burks@delta.com**

Telephone **404-773-5518**



Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number as registered in the UK match the information held on the public Register.
- ☐ You have completed the date of appointment.
- ☐ You have provided both the service address and the usual residential address.
- ☐ Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number.
- ☐ You have included all former names used for business purposes over the last 20 years.
- ☐ You have enclosed a relevant higher protection application if applying for this at the same time as completing this form.
- ☐ You have entered the extent of authority of the new person authorised in Section 6.
- ☐ You have signed the form.



Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.



Where to send

You may return this form to any Companies House address:

England and Wales:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.

Scotland:

The Registrar of Companies, Companies House,
Fourth floor, Edinburgh Quay 2,
139 Fountainbridge, Edinburgh, Scotland, EH3 9FF.
DX ED235 Edinburgh 1
or LP - 4 Edinburgh 2 (Legal Post).

Northern Ireland:

The Registrar of Companies, Companies House,
Second Floor, The Linenhall, 32-38 Linenhall Street
Belfast, Northern Ireland, BT2 8BG.
DX 481 N.R. Belfast 1.

Higher protection

If you are applying for, or have been granted, higher protection, please post this whole form to the different postal address below:

The Registrar of Companies, PO Box 4082,
Cardiff, CF14 3WE.



Further information

For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk