

This form should be completed in black.

Return delivered for registration of a branch of an oversea company

	(Pursuant to Schedulo 21A, paragraph 1 of the Companies Act 1985)
	For affice USE FC 7574. BN FC 2051
Corporate name (name in parent state)	BANK OF LREDIT AND LOMMERCE INTERNATIONAL SA
Business name (if different to corporate name)	
Country of incorporation	Luxemburg
identity of register (if applicable)	A Register of Commerce, Luxuenbourg and registration no. RC B10370
Legal form (See note 3)	PRIVATE LIMITED COMPANY
1 See note 2	PART A - COMPANY DETAILS

* State whether the company is a credit or financial institution (1)These	* Is the company subject to YES boxes need not be complete	NO 🗆	
Governing law (See note 4)			
Accounting requirements	Period for which the comparent law. from	ny is required to prepare a	ccounts by
	Period allowed for the prep for the above period	aration and public disclos	ure of accounts months

(2	This box need NOT be completed by companies from EC member states, OR where the constitutional documents of the company already show this information.
Address of principal place of business in home country	
Objects of company	
Issued share capital	Currency
Company Secretary(les)	*Style/Title
Name	Forenames
	Surname
Voluntary details	*Honours etc.
	Previous Forenames
	1 Tevious sufficiely
Address	
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town County/Region Postcode Country
Company Secretary(ies)	*Style/Title
(See note 10) Name	Forenames
	Surname
* Voluntary details	*Honours etc.
	Previous Forenames
	Previous surplame
Address	
Usual residential address must be	Post jówn
given. In the case of a corporation, give the registered or principal office address.	Country/Region Postcode Country
(You may photocopy this page if required)	PóstcodeCountry

FILE COPY



OF AN OVERSEA COMPANY

(Establishment of a branch)

Company No.

FC007574

Branch No.

BR002051

The Registrar of Companies for England and Wales hereby certifies that

BANK OF CREDIT AND COMMERCE INTERNATIONAL S.A.

has this day been registered under Schedule 21A to the Companies Act 1985 as having established a branch in England and Wales

Given at Companies House, Cardiff, the 12th November 1993

For The Registrar Of Companies

H. G. Pell



Directors	*Style/Title
Name	Forenames
	Surname
* Voluntary details	*Honours etc.
Voluntary dotans	Previous Forenames
	Previous surname
Address	
Usual residential address must be	Post town
given. In the case of a corporation, give the registered or principal	County/Region
office address.	Postcode Country/
	Date of Birth Nationality
	Business Occupation
	Other Directorships
SCOPE OF AUTHORITY	The extent of the authority to represent the company is:- (give details)
Give brief particulars of the extent of the powers exercised. (e.g. whether	
they are limited to powers expressly conferred by the instrument of appointment; or whether they are	
subject to express limitations.) Where the powers are exercised	
jointly give the name(s) of the person(s), concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.	
on me torm.	These powers :-
# Mark box(es) as applicable	# May be exercised alone
	# OR # Must/be exercised with :-
	(Give name(s) of co-authorised person(s))
(You may photocopy this page as required)	
	<u>V</u>

Directors	*Style/Title
(Sue note 10) Name	
ияша	Forenames
	Surname
* Voluntary details	*Honours etc.
Volumery dolume	Previous Forenames
	Previous surname
Address	
	Post town
Usual residential address must be given. In the case of a corporation,	County/Region
give the registered or principal office address.	Postcode Country
	Date of Birth Nationality
	Business Occupation
	Other Directorships
SCOPE OF AUTHORITY	The extent of the authority to represent the company is:- (give details)
Give brief particulars of the extent of the powers exercised. (e.g. whether	
they are limited to powers expressly conferred by the instrument of	
appointment; or whether they are subject to express limitations.)	
Where the powers are exercised jointly give the name(s) of the person(s).	
concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.	
on the total.	These powers :-
# Mark box(es) as applicable	# May be exercised alone
	# OR
	" Must be exercised with :- (Give name(s) of co-authorised person(s))
(You may photocopy this page as required)	
au i odan aay	

Constitution of company	
#Mark box(es) //}	# A certified copy of the instrument constituting or defining the AND constitution of the company
as applicable	*A certified translation
√800 not0 0j	*is/are delivered for registration
•	
* Delnte as applicable	
AND/OR A certified copy of the constitutional documents and latest accounts of the company, together with a certified translation of them if they are not in the English language, must accon pany this form.	# A copy of the latest accounts of the company AND A certified translation *is/are delivered for registration
AND/OR The company may rely on constitutional and accounting documents previously filed in respect of another branch registered in the United Kingdom.	# The Constitutional documents (*and certified translations) AND/OR The latest accounts (*and certified translations) of the company were previously delivered on the registration of the branch of the company at:- Cardiff
AND/OR	
The company may also rely on particulars about the company previously filed in respect of another branch in that part of Great Britain, provided that any alterations have been notified to the Registrar.	the particulars about the company were previously delivered in respect of a branch of the company registered at THIS registry. Registration no. F 7574/I
AND/OP	
AND/OR The company may also rely on constitutional documents and particulars about the company officers previously filed in respect of a former Place of Business of that company, provided that any alterations have been notified to the Registrar. NOTE:- In all cases, the registration	The Constitutional documents (*and certified translation) AND/OR AND/OR Particulars of the current directors and secretary(s) were previously delivered in respect of a place of business of the company registered at THIS registry.
number of the branch or place of business relied upon must be given.	Registration no.

PART B - BRANCH DETAILS

Persons authorised to represent the company or accept service of process.

Give details of all persons who are authorised to represent the company as permanent representaives of the company in respect of the business of the branch. Give details also of all persons resident in Great Britain, who are authorised to accept service or process on the company's behalf.

* Delete as appropriate

SCOPE OF AUTHORITY

(This part does not apply to a person only authorised to accept service on behalf of the company)

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised, jointly give the name(s) of the person(s), concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as appropriate)

*Style/Title	See	Form	692(1)	(c)	attached	<u> </u>
Förenames	Chrotopher	Morris	Muhiles B	τορί L	ylo Jo	N _A
Surrane	Pary la	cherch,	Stephen	Jan	Alus	<u> </u>
Address	Torely	Ross 4	4 10 B 21	810	65 C	rutilisa
	Friess			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
Post town	Lone	lon		 		
County/Reg	ion		Post	code	ELBN	RNP
Is # A *AND/OR Is # A	Noto :	ccept services to the community of the c	vice of proces is only non y (i) he company i	s on the invest black n fetatio	company پير ارد در در د	r's behalf on belay business
The extent	of the authori	ty to repre	sent the comp	pany is:	- (give d	etails)
a Jon	nt hyp	ud cutors	y 12e	long	26/y	<u>n</u>
England			<u>// </u>		<u>) </u>	
Insolu	very A	de l	986: P	wer	9	
<u> </u>	is will ator	in .	a Comple	1004	Wal	dia vo
	1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u>J'</u>
These po	wers :-					
# 🔁 Ma	y be exercise	ed alone				
OR # ML	st be exercis (0)) of co-authorise	d person(:	s))	
						
					······································	

Sci opposite

Persons authorised to represent the company or accept service of process.

Give details of all persons who are authorised to represent the company as permanent representaives of the company in respect of the business of the branch. Give details also of all persons resident in Great Britain, who are authorised to accept service or process on the company's behalf.

* Delete as appropriate

SCOPE OF AUTHORITY

(This part does not apply to a person only authorised to accept service on behalf of the company)

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.)

Where the powers are exercised, jointly give the name(s) of the person(s), concerned. You may cross refer to the details of person(s) disclosed elsewhere on the form.

Mark box(es) as appropriate)

(You may photocopy this page as required)

*Style/Ti	tle	ee	Form	692	(I) (i)	alloched
Forenam	es					
Surname	****					
Address						
			4 12			
Post towr	1					
County/F						
ls#						ompany's behalf
*AND/OR						
is #	Authorise	d to repre	esent the c	ompany i	n relation :	to that business
The exte	nt of the au	ithority to	represent	the comp	pany is :- ((give details)
			<u> </u>			
					<u></u>	
						
. 						
These p	oowers :-					
# 🗀	May be exe	ercised a	one			
OR			4.1			
# 🗀	Must be ex		rith :- name(s) of c	o-authorised	d person(s))	
						
			· · · · · · · · · · · · · · · · · · ·			

		4 4
Address of branch	Address 100 LEADEN HALL STREET	
(Soo acts £13	LONDON ECJA JAD	
	Post town	
	County\RegionPostcode	
Branch Details	Date branch opened 2,90,97,4	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Business carried on at branch	
	Sala	· · ·
SIGNATURE	-	······································
SIGNATURE	Signed (* Director / Secretary / Permanent repret	contativa)
	Date 21/7/23 John Liquidator.	
	This form containsO continuation sheets.	
To whom should Companies House	Name R HOUGHTON	
direct any enquiries about the information on this form?	Address FRIARY LOURT , 65 CRUTCHED	FRIARS,

Name	R	Ho	<u>1)4110</u>	W			
Address	FRIAR	4 6	OURT		65	CRUTCHEN	FRIARS
_		Lor	√Dor√				
						Postcode	ELBN 2NP
Telephone	071	936	3000			Extension	

When completed, this form together with any enclosures should be delivered to the Registrar of Companies at for branches established in England and Wales for branches established in Scotland

Companies House Crown Way Cardiff CF4 3UZ Companies House 100 - 102 George Street Edinburgh EN2 3DJ