

## BR6

## CHFP010

This form should be completed in black

24/06/2008 COMPANIES HOUSE

Return of change of person authorised to accept
service or to represent the branch of an oversea
company or of any change in their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

	21 days of the alteration		
being made	Company Number	FC027333	Branch Number BR 009224
	Company Name	DB sirius (a	CAYMAN) UMITED
	Branch Name (If different to corporate name)		
TERMINATIO	ON OF AUTHORITY	Date of termination	Day Month Year
See overleaf fo change of partic	r appointments and culars	Position vacated (Mark appropriate box(es))	Person authorised to accept service on the company's behalf  Person authorised to represent the company at the branch
any person auth or process on the who was author	e details for resignation of norised to accept service ne company's behalf or rised to represent the ation to the business of the	Name Address	
information in the do, it will help Contact you if the The contact info	e to give any contact ne box opposite but if you companies House to here is a query on the form formation that you give will probate of the probate		Tel

When completed, this form should be delivered to the address on page 4

# APPOINTMENT Persons authorised to represent the company or who may accept service or process Give the name and address of the person appointed, together with the date of appointment Mark the box(es) relevant to the appointment is to both

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

positions mark both

boxes

\* Delete as appropriate

## SCOPE OF AUTHORITY

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

# Mark box(es) as appropriate

*Style/Title				
<b></b>				
Surname				
Address †† ——				
County/Region	Postcode			
Is authorised to	accept service of process on the company's behalf			
*AND/OR				
Is authorised to	represent the company in relation to that business  Day Month Year			
Date of appointment	L L L L			
The authority to represent the company is -				
Is # Authorised	to accept service of process on the company's behalf			
*AND/OR				
Is # Authorised to represent the company in relation to that business				
The extent of the authority to represent the company is - (give details)				
These powers -				
# May be exercised alone				
OR				
# Must be exercised with -  (Give name(s) of co-authorised person(s))				
<u> </u>				



### **CHANGE OF PARTICULARS** Month Day Year Date of change 0 6 0 Change of particulars of person authorised to accept service Mark the appropriate box. If change relates to both positions, mark both boxes Change of particulars of person authorised to represent the company Change of name ANDREW WILLIAM **Forenames** Name previously notified to Companies House Surname BARTLETT Forenames New name Surname Change of residential WINCHESTER HOUSE Address address †† (enter new address) 1 GREAT WINCHESTER STREET †† Tick this box if the Post town address shown is a service address for Postcode EC2N 2DB County/Region LONDON the beneficiary of a Confidentiality Order granted under the Country UNITED KINGDOM provisions of section (CHANGE OF ADDLESS FOR SERVICE OF PROCESS). The extent of the authority of the above person to represent the company has been altered 723B of the Companies Act 1985 to - [give details] Change of authority to (this part does not apply to a person authorised to accept service on behalf of the company) Give brief particulars of The powers any change in the authority of the officer to represent the company, May be exercised alone including any alteration to the manner in which the OR existing or new powers may be exercised (e.g. Must be exercised with -(Give name(s) of co-authorised person(s)) requiring them to be exercised with other persons) # Mark appropriate box Signature \* Delete as applicable \* (Director / Secretary /-Permanent representative)