



BR6

CHFP010

This form should be completed in black

This notice must be delivered to the Registrar within 21 days of the alteration being made

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

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

Company Number

Company Name

Branch Name

(If different to corporate name)

FC027344

Branch Number BR009233

STORES INTERNATIONAL LIMITED

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

Date of termination

Day Month Year

--	--	--	--	--	--	--	--	--	--

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

Complete these details for resignation of any person authorised to accept service or process on the company's behalf or who was authorised to represent the company in relation to the business of the branch

Name

Address

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

Tel

(04)

TUESDAY



A47

AMFKY0UN

24/06/2008

100

COMPANIES HOUSE

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. If the appointment is to both positions mark both boxes

†† 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

☐

* 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	_____						
Forenames	_____						
Surname	_____						
Address ††	_____ _____ _____						
Post town	_____						
County/Region	_____ Postcode _____						
<input type="checkbox"/>	Is authorised to accept service or process on the company's behalf						
*AND/OR							
<input type="checkbox"/>	Is authorised to represent the company in relation to that business						
Date of appointment	<table border="1"><tr><td>Day</td><td>Month</td><td>Year</td></tr><tr><td><div></div></td><td><div></div></td><td><div></div></td></tr></table>	Day	Month	Year	<div></div>	<div></div>	<div></div>
Day	Month	Year					
<div></div>	<div></div>	<div></div>					
The authority to represent the company is -							
Is # <input type="checkbox"/>	Authorised to accept service or process on the company's behalf						
*AND/OR							
Is # <input type="checkbox"/>	Authorised to represent the company in relation to that business						
The extent of the authority to represent the company is - (give details)							
_____ _____ _____ _____ _____							
These powers -							
# <input type="checkbox"/>	May be exercised alone						
OR							
# <input type="checkbox"/>	Must be exercised with -						
(Give name(s) of co-authorised person(s))							
_____ _____ _____ _____							

CHANGE OF PARTICULARS

Mark the appropriate box. If change relates to both positions mark both boxes

Change of name

Name previously notified to Companies House

New name

Change of residential address ††

(enter new address)

†† 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

Change of authority to act

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

Give brief particulars of any change in the authority of the officer to represent the company, including any alteration to the manner in which the existing or new powers may be exercised (e.g. requiring them to be exercised with other persons)

Mark appropriate box

Date of change

Day	Month	Year
18	06	2008

- ☒ Change of particulars of person authorised to accept service
- ☐ Change of particulars of person authorised to represent the company

Forenames ADAM PAUL

Surname RUTHERFORD

Forenames _____

Surname _____

Address WINCHESTER HOUSE

1 GREAT WINCHESTER STREET

Post town _____

County/Region LONDON Postcode EC2N 2DB

Country UNITED KINGDOM

(CHANGE OF ADDRESS FOR SERVICE OF PROCESS)

The extent of the authority of the above person to represent the company has been altered to - [give details]

The powers -

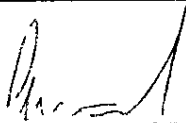
☐ May be exercised alone

OR

☐ Must be exercised with - (Give name(s) of co-authorised person(s))

Signature

* Delete as applicable

Signed  (Director / Secretary / Permanent representative)

Date 20/6/2008