



Confirmation Statement

Company Name: **ALPHAMED EUROPE LIMITED**

Company Number: **NI053473**



Received for filing in Electronic Format on the: **10/01/2017**

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Company Name: **ALPHAMED EUROPE LIMITED**

Company Number: **NI053473**

Confirmation **31/12/2016**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	100
Currency:	GBP	Aggregate nominal value:	100

Prescribed particulars

ON A SHOW OF HANDS EVERY MEMBER (WHO BEING AN INDIVIDUAL) IS PRESENT IN PERSON OR (BEING A CORPORATION) IS PRESENT BY A DULY AUTHORISED REPRESENTATIVE, NOT BEING HIMSELF A MEMBER ENTITLED TO VOTE, SHALL HAVE ONE VOTE AND ON A POLL EVERY MEMBER SHALL HAVE ONE VOTE FOR EVERY SHARE OF WHICH HE IS THE HOLDER. NO MEMBER SHALL VOTE AT ANY GENERAL MEETING OR ANY SEPARATE MEETING OF THE HOLDERS OF ANY CLASS OF SHARES IN RESPECT OF ANY SHARE HELD BY HIM UNLESS ALL MONEYS PAYABLE BY HIM IN RESPECT OF THAT SHARE HAS BEEN FULLY PAID.

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	100
		Total aggregate nominal value:	100
		Total aggregate amount unpaid:	0

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **DR MARTIN MURPHY**

Service address recorded as Company's registered office

Country/State Usually **USA**
Resident:

Date of Birth: ****/12/1942**

Nationality: **AMERICAN**

Nature of control

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

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **MRS ANN MURPHY**

Service address recorded as Company's registered office

Country/State Usually **USA**
Resident:

Date of Birth: ****/10/1942**

Nationality: **AMERICAN**

Nature of control

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

Notification Details

Date of becoming a registrable RLE: **06/04/2016**

Name: **THE ALPHAMED COMPANY INC.**

Registered or Principal Office Address: **318 BLACKWELL STREET
SUITE 260
DURHAM
NORTH CAROLINA
USA
NC 27701**

Legal Form: **CORPORATION**

Governing Law: **STATE OF NORTH CAROLINA, USA**

Register: **STATE OF NORTH CAROLINA, USA**

Country/state of register: **STATE OF NORTH CAROLINA, USA**

Registration Number: **N/A**

Nature of control

The relevant legal entity holds, directly or indirectly, more than 50% but less than 75% 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