## FORM BB

## **THE COMPANIES ACT NO. 5 OF 2009**



## **CORPORATE AFFAIRS COMMISSION**



## Notice of Cessation of Appointment of Receiver or Manager

NAME OF								
COMPANY								
COMPANY NO:								
DECISTEDED								
REGISTERED ADDRESS								
ADDRESS								
TELEPHONE NO								
	1							
Details of Re	eceiver or Manager	Ceasing to Ac	ct as such					
Name								
Address								
Telephone N	0							
Email								
2111011								
Date of appointment			(DD MM YR)					
Date of appointment				(00	IVIIVI IIV,			
	named above has t						r	
manager of t	the properties cove	ed by the ins	trument cou	ırt order	specified	below		
Description of Instrument or Court Action Number					Date of Creation of Instrument or Date of Court Order			
					DD	MM	YYYY	

**DETAILS** 

1<sup>st</sup> Director

2nd Director/ Secretary

Name o	f								
Directo	r								
Telepho	ne No								
Address	5								
Signatu	re								
Email									
Submitted / Filed									
DAY			MONTH			YEAR			
A 1	-l-l- <b>f</b>	111	1/h h	tal baranga bila	<b>D.</b> G		Saula Turra efe u		
Applicable fees shall/has been paid by : Mobile Money Bank Transfer									
Presenter Details if different from director/secretary									
Name									
Address									
Telepho	ne								
Email									
Signatur	e								