In accordance with Section 56 of the Companies Act 2006.

# NM06

Comp

Request to seek comments of government department or other specified body on change of name

Companies House

What this form is for
You may only use this form to
confirm that consent has been
sought to use sensitive/restricted
words in a company name.

What this form is NOT for
You cannot use this form as part
of an application to register a new



\*A9618Y15\* A14 09/06/2020 COMPANIES HOUSE

#26

1	Company details			
Company number	4946437	→ Filling in this form Please complete in typescript or in		
Existing company name in full	KERNOW CHIROPRACTIC LIMITED	bold black capitals.		
		All fields are mandatory unless specified or indicated by *		
2	Proposed name			
	The above company resolved to change the company name to:	The Registrar cannot change the name until a copy of any response from the government department o other specified authority has been received.		
Proposed name •	NEWQUAY CHIROPRACTIC CLINIC LTD			
	Please tick the box to confirm that the company has requested authorisation from a government department or other specified body to include sensitive and/or restricted words or expressions in the proposed company name.			
3	Signature			
	I am signing this form on behalf of the company.	<b>⊘</b> Societas Europaea		
Signature	Signature X	If the form is being filed on behalf of a Societas Europaea (SE) please		
	This form may be signed by: Director , Secretary, Person authorised , Administrator, Administrative receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager.			

## **NM06**

Request to seek comments of government department or other specified body on change of name

You do not h	nter into			oct in	form	ation	but if
you do it will on the form.	ll help Com . The contac	panie t info	s Hoi irmat	use if ion y	ther ou gi	e is a	query
visible to se	archers of t	he pu	blic r	ecor	d.		
Contact name	,, <u>.</u>						
Company name	. , , , , , , , , , , , , , , , , , , ,						
Address				~~~~	***************************************		<del></del>
		· · ·					
Post town							
County/Region					,		
Postcode							
Country							
DX							
[elephone	. 1						
✓ Check	dist						
We may ret			plete	ed in	corre	ectly	or

Please make sure you have remembered the

☐ The company name and number match the information held on the public Register.

You have signed the form.

You have provided the proposed name in section 2.

You have ticked the box in section 2 if your name contains sensitive or restricted words.

following:

### Important information

Please note that all information on this form will appear on the public record.

#### Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:

For companies registered in England and Wales: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

For companies registered in Scotland: The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF. DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post).

For companies registered in Northern Ireland: The Registrar of Companies, Companies House,

Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG. DX 481 N.R. Belfast 1.

## **Further information**

For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk