



**Statement of satisfaction
in full or in part of charge**

Company Name: **DENTAL ELEGANCE (DENTAL PRACTICE) LIMITED**

Company Number: **06941731**



Received for filing in Electronic Format on the: **18/05/2023**

XC3RGMTU

Details of Satisfaction

Charge created (or property acquired) on or after 6th April 2013.

Charge code: **0694 1731 0002**

Satisfaction of
charge: **In full**

Details of the person delivering this statement and their interest in the charge

Name: **ANNA SELLARS**

Address: **ROSEHILL NEW BARN LANE CHELTENHAM UNITED KINGDOM GL52 3LZ**

Interest: **DIRECTOR OF THE CHARGOR**

Authentication of Form

This form was authorised by: **a person with an interest in the registration of the charge.**