DOLPHIN TRUST GMBH Change/Appointment of Trustee Form

This form is for use where a new trustee is appointed to the exclusion of (i.e. in substitution for) a former trustee or a trust is declared over the Loan Notes.

Section A: Client Details

CERT: 11823

Name	Steven	
Any Middle Names (if relevant)		
Surname	Blower	
Office/Home Address	2 St Davids Close. Cheltenham, GL51 3HL	
Phone number	0797 4900265	
E-mail Address	steveblower50@gmail.com	

Section B: Former Trustee Details (where applicable)

Pension/Administrator Name	ROWANMOOR		
Scheme Name	Zoerewolb Ltd Executive Pension Scheme		
Trustee Name	Rowanmoor Trustees Limited		
Date of cessation of trusteeship	06 September ^h 2019		

Section C: Incoming Trustee Details

Pension/Administrator Name	Cranfords Trustees Limited	
Scheme Name	Zoerewolb Ltd Executive Pension Scheme	
Trustee Name	Cranfords Trustees Limited	

Attach signed proof of ch	ange of	trust mandate/proof of appointment - tick to confirm	x
Total Investment	£	17000	
Amount (principal) (or attach schedule of cli	ent deta	and the second s	

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Section D: Bank details for new Trustee

Your bank details are required to ensure the return of capital & interest

Bank Name & Address	AIB Bank PLC 4 Hardman St, Manchester M3 3HF, UK	
Bank Sort Code	23-83-96	
Bank Account Number	6575 1568 04690077	
Name/s on Bank Account	Zoerewolb Ltd Executive Pension Scheme	
SWIFT	AIBKGB2L	
IBAN number	GB87AIBK23839604690077	

Section E: Signature

I/We, the first below undersigned, confirm that I/we am/are the newly appointed trustee to the pension scheme named above, to the exclusion of the former trustee(s) named above and I/we hereby request you to register my/our name as the registered holder of the relevant Loan Notes for the investments specified above/attached, and to update the payment details for the returns from the investments in accordance with this form. I/we are responsible for any inaccuracies or omissions from the data herein or attached hereto.

I/we understand that you may need to complete additional due diligence processes around my/our appointment and may need to contact the underlying client(s), and I consent to such processes and contacts.

Signature:

Print Name:

Date:

Paul Davies

23/4/2020

[For use when the appointment is of a new trustee for the first time] I/We the below undersigned confirm the above appointment, as beneficial owner of the Loan Notes.

Print Name: STEVEN BLOWER Date: 29-08-19

Contacts

For administrative queries please email dolphin@whitesfundservices.com or call 02030 112775.