



## Appointment of Director

Company Name: **Sun Alliance Insurance Overseas Limited**

Company Number: **00087946**



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XAC42HKB

### New Appointment Details

Date of Appointment: **27/06/2021**

Name: **MR GRAEME MICHAEL ROBINSON**

The company confirms that the person named has consented to act as a director.

Service Address: **NEW HALL PLACE OLD HALL STREET  
LIVERPOOL  
LIVERPOOL  
UNITED KINGDOM  
L3 9PP**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **\*\*/01/1980**

Nationality: **BRITISH**

Occupation: **HEAD OF FINANCIAL CONTROL**

## **Authorisation**

### **Authenticated**

**This form was authorised by one of the following:**

**Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor**