

## **Appointment of Director**

Company Name: **INSTITUTE OF MASTERS OF WINE(THE)** 

Company Number: 01059707

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## **New Appointment Details**

Date of Appointment: 14/09/2022

MR NICOLAS QUILLÉ Name:

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

Service address recorded as Company's registered office

Country/State Usually

**UNITED STATES** 

Resident:

Date of Birth: \*\*/06/1971

Nationality: **FRENCH** 

Occupation: **MASTER OF WINE** 

## **Authorisation**

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