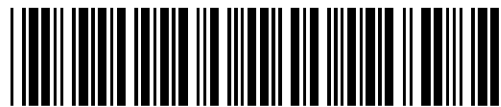




Termination of a Director Appointment

Company Name: **MASTERCOVER INSURANCE SERVICES LIMITED**

Company Number: **01393740**



Received for filing in Electronic Format on the: **02/10/2020**

X9EUHUSZ

Termination Details

Date of termination: **01/10/2020**

Name: **HUW SCOTT WILLIAMS**

Authorisation

Authenticated

This form was authorised by one of the following:

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