



Appointment of Secretary

Company Name: **MALYON LESTRANGE INSURANCE SERVICES LIMITED**

Company Number: **02288983**



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X36HCCIJ

New Appointment Details

Date of Appointment: **01/04/2014**

Name: **MRS JARLATH DELPHENE WADE**

Consented to Act: **YES**

Service address recorded as Company's registered office

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