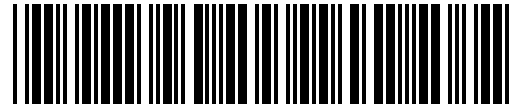




## Termination of a Director Appointment

Company Name: **SABRE INSURANCE COMPANY LIMITED**

Company Number: **02387080**



Received for filing in Electronic Format on the: **06/12/2023**

XCHT1LZF

### Termination Details

Date of termination: **18/11/2023**

Name: **MR ANDREW DAVID POMFRET**

### 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.