



## Appointment of Director

Company Name: **ANGLESEY MAIDS LTD**

Company Number: **13345926**



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### New Appointment Details

Date of Appointment: **26/06/2023**

Name: **MS LEONE GRANT**

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

Service Address: **15 STAD BRYN GLAS  
BRYNSIENCYN  
LLANFAIRPWLLGWYNGYLL  
WALES  
LL61 6RD**

Country/State Usually  
Resident: **WALES**

Date of Birth: **\*\*/01/1990**

Nationality: **BRITISH**

Occupation: **CLEANER**

## **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**