



Appointment of Director

Company Name: **FAMILY MEDIATION N.I.**

Company Number: **NI063335**



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New Appointment Details

Date of Appointment: **19/09/2019**

Name: **MS CATHERINE CAIRNS**

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

Service Address: **RIGHTS HOUSE 127-131 ORMEAU ROAD ORMEAU ROAD
BELFAST
NORTHERN IRELAND
BT7 1SH**

Country/State Usually Resident: **NORTHERN IRELAND**

Date of Birth: ****/03/1976**

Nationality: **BRITISH**

Occupation: **CIVIL SERVANT**

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