



Appointment of Director

Company Name: **COMMERCIAL INSURANCE SERVICES DIRECT LTD**

Company Number: **NI064825**



Received for filing in Electronic Format on the: **08/02/2024**

XCWFBCUA

New Appointment Details

Date of Appointment: **07/02/2024**

Name: **MS JULIE GIBBONS**

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

Service address recorded as Company's registered office

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

Date of Birth: ****/08/1972**

Nationality: **IRISH**

Occupation: **COMPANY DIRECTOR**

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