



Appointment of Director

Company Name: **FLOSURE LIMITED**

Company Number: **NI606802**



Received for filing in Electronic Format on the: **06/04/2023**

XC0UYE09

New Appointment Details

Date of Appointment: **12/08/2022**

Name: **MS LISA CHAMBERS**

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: ****/02/1979**

Nationality: **BRITISH**

Occupation: **INSURANCE ADVISOR**

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