



Appointment of Director

Company Name: **ALJOY UNIQUE HEALTHCARE SERVICES LIMITED**

Company Number: **NI655818**



Received for filing in Electronic Format on the: **25/09/2018**

X7F9ELTO

New Appointment Details

Date of Appointment: **25/09/2018**

Name: **MR AMOS ALADE**

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

Service Address: **44-46 ELMWOOD AVENUE.
BELFAST
ANTRIM
NORTHERN IRELAND
BT9 6AZ**

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

Date of Birth: ****/10/1958**

Nationality: **IRISH**

Occupation: **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