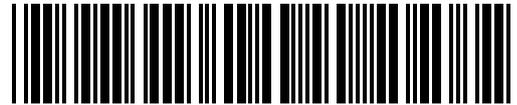




Appointment of Director

Company Name: **Sun Alliance and London Insurance Limited**

Company Number: **00638918**



Received for filing in Electronic Format on the: **14/09/2021**

XACZW5TF

New Appointment Details

Date of Appointment: **08/09/2021**

Name: **MR GRAEME MICHAEL ROBINSON**

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

Service Address: **NEW HALL PLACE OLD HALL STREET
LIVERPOOL
LIVERPOOL
UNITED KINGDOM
L3 9PP**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/01/1980**

Nationality: **BRITISH**

Occupation: **HEAD OF FINANCIAL CONTROL**

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