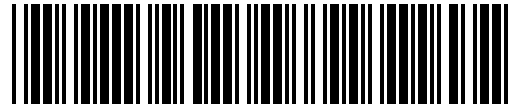




Termination of a Director Appointment

Company Name: **DISABILITY SHEFFIELD CENTRE FOR INDEPENDENT LIVING LIMITED**

Company Number: **04639160**



Received for filing in Electronic Format on the: **29/11/2023**

XCHCMX7L

Termination Details

Date of termination: **29/11/2023**

Name: **MR ADAM MICHAEL DOUGLAS BUTCHER**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Liquidator, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.