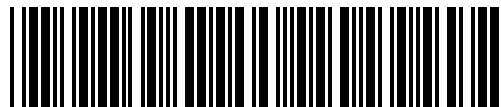




Appointment of Director

Company Name: **FEDERATION OF (OPHTHALMIC AND DISPENSING) OPTICIANS**

Company Number: **00368950**



Received for filing in Electronic Format on the: **08/11/2021**

XAGSUIBN

New Appointment Details

Date of Appointment: **11/10/2021**

Name: **MRS HAYLEY JOANNE HOLFORD**

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: **ENGLAND**

Date of Birth: ****/08/1986**

Nationality: **BRITISH**

Occupation: **OPTOMETRIST**

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