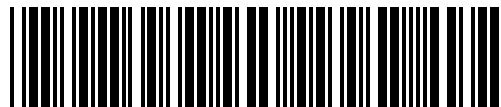




## Appointment of Director

Company Name: **SALLIS HEALTHCARE LIMITED**

Company Number: **00402658**



Received for filing in Electronic Format on the: **29/06/2021**

XA7NUB0Q

### New Appointment Details

Date of Appointment: **22/06/2021**

Name: **TINA HERROD**

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

Service Address: **VERNON WORKS WATERFORD STREET  
OLD BASFORD  
NOTTINGHAM  
UNITED KINGDOM  
NG6 0DU**

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

Date of Birth: **\*\*/03/1973**

Nationality: **BRITISH**

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**