



Termination of a Director Appointment

Company Name: **1A DENTAL PRACTICE LIMITED**

Company Number: **05397004**



AD1WPIBU

Received for filing on the: **27/04/2024**

Termination Details

Date of termination: **11/04/2024**

Name: **KRISTA NYREE WHITLEY**

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.