



## Appointment of Director

Company Name: **ION AMBULANCE CARE LTD**

Company Number: **09006078**



Received for filing in Electronic Format on the: **02/12/2022**

XBHZDX1N

### New Appointment Details

Date of Appointment: **01/12/2022**

Name: **DR JOHAN DU PLESSIS**

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

Service Address: **16 STOCKWOOD MEADOW  
STAPLECROSS  
ROBERTSBRIDGE  
ENGLAND  
TN32 5FB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/12/1966**

Nationality: **BRITISH**

Occupation: **DOCTOR**

## **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**