



## Appointment of Director

Company Name: **INNERSTRENGTH HEALTH LIMITED**

Company Number: **10881659**



Received for filing in Electronic Format on the: **21/09/2022**

XBD1FZ2Y

### New Appointment Details

Date of Appointment: **21/09/2022**

Name: **MS SIOBHAN TAAFFE**

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

Service Address: **UNIPHAR PLC 4045 KINGSWOOD ROAD  
CITYWEST BUSINESS PARK  
DUBLIN  
DUBLIN  
IRELAND**

Country/State Usually Resident: **IRELAND**

Date of Birth: **\*\*/05/1971**

Nationality: **IRISH**

Occupation: **COMPANY 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**