In accordance with section 109 of the Insolvency Act 1986

## 600



# Notice of appointment of liquidator in a members' or creditors' voluntary winding up

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	
Company number	0 0 1 1 2 2 5 3	→ Filling in this form Please complete in typescript or in
Company name in full	Prean Holdings Limited	bold black capitals.
		_
2	Liquidator's name	
Full forename(s)	Ian Harvey	
Surname	Dean	_
3	Liquidator's address	
Building name/number	Deloitte LLP	
Street	1 New Street Square	_
		_
Post town	London	_
County/Region		
Postcode	E C 4 A 3 H Q	
Country	United Kingdom	_
4	Liquidator's email address or telephone number •	● You must give an email address or
Email address	rsthakrar@deloitte.co.uk	telephone number. All information on this form will appear on the
Telephone number	+44 (0) 20 7303 8655	public record.
5	Insolvency practitioner number	
Number	0 0 9 4 6 2	

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6	Liquidator's name <sup>0</sup>	
Full forename(s)	Stephen Roland	Other Liquidator's details     Use this section to tell us about
Surname	Browne	another liquidator.
7	Liquidator's address <b>②</b>	
Building name/numbe	Deloitte LLP	Other Liquidator's details
Street	1 New Street Square	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town	London	
County/Region		
Postcode	E C 4 A 3 H Q	
Country	United Kingdom	
8	Liquidator's email address or telephone number <sup>9</sup>	You must give an email address or
Email address	rsthakrar@deloitte.co.uk	telephone number. All information on this form will appear on the
Telephone number	+44 (0) 20 7303 8655	public record.
9	Insolvency practitioner number	
Number	0 0 9 2 8 1	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
11	Appointment details	
	The appointment was made by (Tick one)  ☐ Company ☐ Creditors	
12	Type of liquidation	
	Tick to confirm the liquidation type ☐ Members ☐ Creditors	
13	Sign and date	
Liquidator's signature	Signature	×
Signature date	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	

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### Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name	Sean Waring Mitchell
Company name	Deloitte LLP
Address	1 New Street Square
Post town	London
County/Region	
Postcode	E C 4 A 3 H Q
Country	United Kingdom
DX	
Telephone	+44 (0) 20 7303 6688

#### ✓ Checklist

We may return forms completed incorrectly or with information missing.

## Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

#### Important information

All information on this form will appear on the public record.

#### **☑** Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

#### **Turther information**

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse