CHFP080

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

FORM No. 600

Please do not

Write in this margin

Please complete legibly preferably in black type or bold block lettering *Insert full name

of company

Pursuant to section 109 of the Insolven	cy Act 1986		
To the Registrar of Companies (Address Overleaf)	For offic	cial use	Company number
Name of Company			
* Insulators Limited	· ·		
Nature of Business			
Dormant Subsidiary			<u> </u>
I give notice that I have been appointed 17 September 2009	liquidator of the above c	ompany on	
The appointment was by members			
Type of liquidation – Members' Voluntar	ry Liquidation		
Name of Liquidator Office holder number Address Merchant Exch Whitworth Stree Manchester M1 5WG	nange		7
Signature - MA	2	Date 2	9 19 159
Name of Liquidator Office holder number Address			
Address			
Signature		Date	
	For Official Use General Section	Post	room

Time Critical Reference

M1 5WG

ARY9ADQL

01/10/2009 **COMPANIES HOUSE**

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