

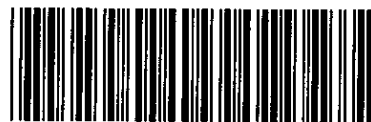
600

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



Companies House

WEDNESDAY



A22 *A84JBDOP* 01/05/2019 #258
COMPANIES HOUSE

0

1 Company details

Company number 0 0 8 3 3 7 5 2

Company name in full Skyway Hotels Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Catherine Mary

Surname Williamson

3 Liquidator's address

Building name/number The Zenith Building

Street 26 Spring Gardens

Post town Manchester

County/Region Lancashire

Postcode M 2 1 A B

Country

4 Liquidator's email address or telephone number ^①

Email address cwilliamson@alixpartners.com

Telephone number

① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 1 5 5 7 0

600

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6 Liquidator's name¹		1 Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Alastair	
Surname	Beveridge	
7 Liquidator's address²		2 Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	6	
Street	New Street Square	
Post town	London	
County/Region	Greater London	
Postcode	E C 4 A 3 B F	
Country		
8 Liquidator's email address or telephone number³		3 You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	abeveridge@alixpartners.com	
Telephone number		
9 Insolvency practitioner number		
Number	8 9 9 1	
10 Statement of appointment		
I confirm the appointment of the liquidator(s) on		
Date	d 0 1 m 0 4 y 2 0 y 1 9	
11 Appointment details		
The appointment was made by (Tick one)		
<input checked="" type="checkbox"/> Company		
<input type="checkbox"/> Creditors		
12 Type of liquidation		
Tick to confirm the liquidation type		
<input checked="" type="checkbox"/> Members		
<input type="checkbox"/> Creditors		
13 Sign and date		
Liquidator's signature	Signature X (Signature) X	
Signature date	d 2 3 m 0 6 y 2 0 y 1 9	

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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

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone

**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.

**Further 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

600 - continuation page

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

1 Company details

Company number	<input type="text"/>	
Company name in full	<input type="text"/>	

2 Liquidator's name

Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	

3 Liquidator's address

Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	

4 Liquidator's email address or telephone number ¹

Email address	<input type="text"/>	¹ You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	

5 Insolvency practitioner number

Insolvency practitioner number	<input type="text"/>	
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