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 9 5 6 3 2 5	→ Filling in this form  Please complete in typescript or in bold black capitals.
Company name in full	HSBC INSURANCE HOLDINGS LIMITED	
2	Liquidator's name	
Full forename(s)	lan Harvey	
Surname	Dean	
3	Liquidator's address	
Building name/number	Teneo Financial Advisory Limited	
Street	The Colmore Building	
	20 Colmore Circus Queensway	
Post town	Birmingham	
County/Region		
Postcode	B 4 6 A T	
Country	United Kingdom	
4	Liquidator's email address or telephone number • O You must	
Email address	summer.thorpe@teneo.com	telephone number. All information on this form will appear on the public record.
Telephone number	+44 20 8052 2418	
5	Insolvency practitioner number	
Number	0 0 9 4 6 2	

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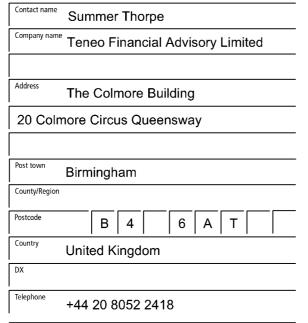
6	Liquidator's name <sup>•</sup>		
Full forename(s)	Stephen Roland	Other Liquidator's details Use this section to tell us about	
Surname	Browne	another liquidator.	
7	Liquidator's address º		
Building name/number	Teneo Financial Advisory Limited	Other Liquidator's details	
Street	The Colmore Building	Use this section to tell us about another liquidator. Use the	
	20 Colmore Circus Queensway	continuation page to tell us about more than two liquidators.	
Post town	Birmingham		
County/Region			
Postcode	B 4 6 A T		
Country	United Kingdom		
8	Liquidator's email address or telephone number <sup>9</sup>	You must give an email address or	
Email address	summer.thorpe@teneo.com	telephone number. All information on this form will appear on the	
Telephone number	+44 20 8052 2418	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 c c c c c c c c c c c c c c c c c c$		
11	Appointment details		
_	The appointment was made by		
	(Tick one)		
	☐ Company ☐ Creditors		
12	Type of liquidation	ı	
_	Tick to confirm the liquidation type		
	✓ Members		
	□ Creditors		
13	Sign and date		
Liquidator's signature	Signature X	×	
Signature date	$\begin{bmatrix} d & 1 & \end{bmatrix} \begin{bmatrix} d & 9 & \end{bmatrix} \begin{bmatrix} m & 0 & \end{bmatrix} \begin{bmatrix} m & 9 & \end{bmatrix} \begin{bmatrix} y & 2 & y & 0 \end{bmatrix} \begin{bmatrix} y & 2 & y & 3 \end{bmatrix}$		

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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.



#### ✓ 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