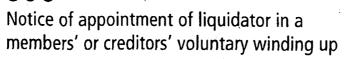
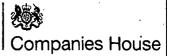
In accordance with section 109 of the Insolvency Act 1986 600







1	Company details		
Company number	0 1 2 4 0 6 8 1	Filling in this form Please complete in typescript or in	
Company name in full	A-Cold Distributors Limited	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Lee		
Surname	De'ath		
3	Liquidator's address		
Building name/number	Town Wall House		
Street	Balkerne Hill		
. •			
Post town	Colchester		
County/Region	Essex		
Postcode	C O 3 3 A D		
Country	-		
4	Liquidator's email address or telephone number • O You must give an email address		
Email address		telephone number. All information on this form will appear on the	
Telephone number	01206 217900	public record.	
5.	Insolvency practitioner number		
Number	9 3 1 6	•	
• .			
•			
•			

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

6	Liquidator's name <sup>0</sup>		
Full forename(s)	Lee	Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	Brocklehurst		
7	Liquidator's address o	·	
Building name/number	Three Brindleyplace	Other Liquidator's details	
Street	2nd Floor	Use this section to tell us about another liquidator. Use the	
		continuation page to tell us about more than two liquidators.	
Post town	Birmingham	. •	
County/Region			
Postcode	B 1 2 J B		
Country		•	
8	Liquidator's email address or telephone number <sup>©</sup>	You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number	01206 217900	public record.	
9	Insolvency practitioner number		
Number	9 4 5 9	•	
10	Statement of appointment		
	1 confirm the appointment of the liquidator(s) on		
Date	0 1 0 6 2 0 2 0	l	
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		
·	X X		
٠	- Thesa		
Signature date	0 5 0 6 72 0 72 0		
	1010 1010 1210	<u> </u>	

#### 600 -

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

# 9

#### **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	Sue Sorrell
. Company name	ÇVR Global LLP
Address	Town Wall House
	Balkerne Hill
·	
Post town	Colchester
County/Region	Essex
Postcode	C O 3 3 A D
Country	
DX	,
Telephone	01206 217900

## ✓ 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