In accordance with section 109 of the Insolvency Act 1986

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

*A7FZSMOG A19 06/10/2018

A7FZSMOG 06/10/2018 #163 COMPANIES HOUSE

	Company details	
Company number	0 1 3 0 7 5 8 4	→ Filling in this form Please complete in typescript or in
Company name in full	BOOT TREE LIMITED(THE)	bold black capitals.
2	Liquidator's name	
Full forename(s)	JONATHAN	
Surname	SINCLAIR	
3	Liquidator's address	
Building name/number	46	
Street	VIVIAN AVENUE	
	HENDON CENTRAL	
Post town	LONDON	
County/Region		
Postcode	N W 4 3 X P	
Country	UK	
4	Liquidator's email address or telephone number •	You must give an email address or telephone number. All information on this form will appear on the public record.
Email address		
Telephone number	020 8203 3344	
5	Insolvency practitioner number	
Number	9 0 6 7	

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6	Liquidator's name [©]	· · · · · · · · · · · · · · · · · · ·
Full forename(s)	N/A	Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address ®	
Building name/numbe	er N/A	Other Liquidator's details
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town		
County/Region		
Postcode		
Country		
8	Liquidator's email address or telephone number	You must give an email address or
Email address	N/A	telephone number. All information on this form will appear on the
Telephone number		public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{bmatrix} d & d & d \end{bmatrix} \begin{bmatrix} d & d & d \end{bmatrix} $	
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	$\begin{bmatrix} d & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 5 & 0 \end{bmatrix} \begin{bmatrix} m & 1 & m & 0 \end{bmatrix} \begin{bmatrix} y & 2 & y & 0 \end{bmatrix} \begin{bmatrix} y & 1 & y & 8 \end{bmatrix}$	

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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.

Contact name	JONATHAN SINCLAIR			
Company name	SINCLAIR HARRIS			
Address	46 VIVIAN AVENUE			
HENDON CENTRAL				
Post town	LONDON			
County/Region				
Postcode	N W 4 3 X P			
Country	UK			
DX				
Telephone	020 8203 3344			

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