In accordance with section 109 of the Insolvency Act 1986

600



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

Companies House

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	- "				
Company number	0 1 5 9 1 3 4 4	→ Filling in this form				
Company name in full	Argent Litho Limited	Please complete In typescript or in bold black capitals.				
2	Liquidator's name	· · · · · · · · · · · · · · · · · · ·				
Full forename(s)	Bijal					
Surname	Shah					
3	Liquidator's address					
Building name/number	27 Church Street					
Street		-				
Post town	Rickmansworth	-				
County/Region	Hertfordshire					
Postcode	W D 3 1 D E					
Country						
4	Liquidator's email address or telephone number •	O You must give an email address or				
Email address	ijal.shah@edgerecovery.com telephone number. All ir on this form will appear					
Telephone number	+44 (0)1923 776 223	public record,				
5	Insolvency practitioner number	T HEALT				
Number	8 7 1 7					

	600	<u> </u>		_	_	_								
			app	oint	men	t of	liaui	dato	rin a ı	nemh	ars' or	creditor	ر ب	
	volui	ntary	/ win	ding	up	•,		uull	4 MI D ,	nemo	icis UI	creditor	5	
				_										
	Liqu	ıidat 	or's	nam	6 ₁	•			· .			"		
Full forename(s)														Other Liquidator's details Use this section to tell us
Surname				,										about another liquidator
	Liqu	idat	or's	addr	ess	2	,				_			
Building														2
name/number		_											•	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				"			•						$\overline{}$	nqaaators.
County/Region													_	
Postcode			-											
Country		<u> </u>	I	<u> </u>	1	<u> </u>	1	<u> </u>					_	
	Liqui	date) P O C	mai	l ad	dres	cor	tolo	hone					
Email address						ui Ç3.			11016		Jer <u>3</u>		[
Email dualess				_			_,							You must give an email address or telephone number. All information on this form will
Telephone number		_	_	-	•									appear on the public record.
:	Insol	vend	y pr	actit	ione	er nu	ımbı	er	-					
Number														
	State	mer	it of	app	oint	men	t		•					
				•••									Г	
	cont	firm t	ha an	noint	man	+ af +1	ao lie		ar(s) on					
Date	1	7		1	0	י טו נו]			\neg	1			ı	
	Appo		l		<u>_</u> _		2	<u>" </u>	2 2					
					_									
	The ap		tmen	t was	mad	е								
		ompa												j
		redito	ors											

	Type of liquidation	
	Tick to confirm the liquidation Members Creditors	
	Sign and date	
Liquidator's signature	× B	
Signature date	Signature 1 8 1 0 2 0 2 2	

600

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

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.					
Bijal Shah					
Edge Recover	ry Limited				
27 Church St	reet				
Rickmanswort	th				
Hertfordshire	e				
Postcode	W D 3 1 D E				
DX					
+44 (0)1923 7	776 223				
√ 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

In accordance with
section 109 of the
Insolvency Act 1986.

600 - continuation page
Notice of appointment of liquidator in a members' or creditors' voluntary winding up

	Company details							
Company number	0 1 5 9 1 3 4 4							
Company name in full	Argent Litho Limited							
	Liquidator's name							
Full forename(s)								
Surname								
	Liquidator's address	<u> </u>						
Building name/number								
Street								
Post town								
County/Region								
Postcode								
Country								
	Liquidator's email address or telephone number	<u>. </u>						
Email address		●You must give an email address or						
Telephone number		telephone number. All information on this form will appear on the public record.						
	Insolvency practitioner number	*						
Insolvency practitioner number								
		12/17 Version 1.0						