

# 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](http://www.gov.uk/companieshouse)

<b>1</b>	<b>Company details</b>	
Company number	0 1 6 3 2 1 1 4	<b>→ Filling in this form</b> Please complete in typescript or in bold black capitals.
Company name in full	Inclax No 8 Limited	
<b>2</b>	<b>Liquidator's name</b>	
Full forename(s)	Gavin	
Surname	Savage	
<b>3</b>	<b>Liquidator's address</b>	
Building name/number	2/3 Pavilion Buildings	
Street		
Post town	Brighton	
County/Region	East Sussex	
Postcode	B N 1 1 E E	
Country		
<b>4</b>	<b>Liquidator's email address or telephone number <sup>①</sup></b>	<b>①</b> You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	colchester@btguk.com	
Telephone number	01206 217900	
<b>5</b>	<b>Insolvency practitioner number</b>	
Number	9 9 5 0	

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## 6 Liquidator's name <sup>①</sup>

Full forename(s) David

Surname Oprey

**① Other Liquidator's details**  
Use this section to tell us about another liquidator.

## 7 Liquidator's address <sup>②</sup>

Building name/number 2/3 Pavilion Buildings

Street

Post town Brighton

County/Region East Sussex

Postcode B N 1 1 E E

Country

**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.

## 8 Liquidator's email address or telephone number <sup>③</sup>

Email address colchester@btguk.com

Telephone number 01206 217900

**③** You must give an email address or telephone number. All information on this form will appear on the public record.

## 9 Insolvency practitioner number

Number 5 8 1 4

## 10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date 2 7 0 9 2 0 2 1

## 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 *P.G. Savage* X

Signature date 2 9 0 9 2 0 2 1

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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 **Sue Sorrell**

Company name **Begbies Traynor (Central) 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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)**