In accordance Section 109 of Insolvency Act 1986 the 600



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

\*A7D2R9SI\* A21 25/08/2018 COMPANIES HOUSE #299

1	Con	npai	ny d	letail	s							
Company number	2	5	9	8	4	6	5		→Filling in this form Please complete in typescrip			
Company name in full	Euro	Elec	tronic	Ren	or in bold black capitals							
2	Liquidator's name											
Full forename(s)	Nich	olas .	Jame	s								
Surname	Timpson											
3	Liqu	uida	tor's	s add	dres	s						
Building name/number	KPM											
Street	8 Prı	nces	Para	de								
Post town	Liver	rpool										
County/Region	Mers	seysid	le									
Postcode	L	3		1	Q	Н						
Country	United Kingdom											
4	Liqu	uida	tor's	em	ail a	ddr	ess	or te	none number •			
Email address	carol	lyn.fo	den@	gkpm	g co ı	You must give an ema     address or telephone number A						
Telephone number	0151 473 5132								information on this form wi appear on the public record.			
5	Insc	olve	ncy	prac	titio							
Number	2	0	6	1	0							

	600											
	Notice of appointment of liquidator in members' or creditors' voluntary winding up											
5	Liquidator's name <b>0</b>	" "										
Full forename(s)	Mark Jeremy	Other Liquidator's details     Use this section to tell us about another liquidator										
Surname	Orton											
7	Liquidator's address ❷											
Building name/number	KPMG LLP	Other Liquidator's details Use this section to tell us about another liquidator Use the										
Street	8 Princes Parade	continuation page to tell us about more than two liquidators										
		·										
Post town	Liverpool											
County/Region	Merseyside											
Post code	L 3 1 Q H											
Country	United Kingdom											
3	Liquidator's email address or telephone number 6											
Email address	carolyn foden@kpmg co uk	You must give an email address or telephone number. All information										
Telephone number	0151 473 5132	on this forma will appear on the public record										
9	Insolvency practitioner number											
Number	8 8 4 6											
10	Statement of appointment											
_	I confirm the appointment of the liquidator(s) on											
Date	2 1 0 8 2 0 1 8											
11	Appointment details											
	The appointment was made by											
	(Tick one)  ☑ Company											
	□ Creditors											
12	Type of liquidation											
12	Tick to confirm the liquidation type											
	✓ Members											
13	Sign and date											
iquidator's signature.	Signature											
	* Note.	×										
Signature date	2 2 0 8 2 0 1 8											

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■ Present	ter in	ıforı	nati	on			Important information		
You do not h but if you do is a query o you give will record	it will n the	help form	Comp The	anies conf	s Hou tact in	se if there formation	All information on this form will appear on th public record.		
Contact name C	arolyr	Fod	en				⊠ Where to send		
Company name	KPMC	G LLF	)				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.		
Address 8 Prin	ces Pa	arade	•						
Post town Liver	pool			-	•				
County/Region N	lerseys	ıde	_						
Postcode	٦	3		1	Q	н	<i>i</i> Further information		
Country United Kingdom							For further information, please see the guidance notes		
DX Telephone 0151 473 5132							on the website at www companieshouse.gov uk or email enquiries@companieshouse gov uk		
				•	·		This form is available in an		
Checklist							alternative format. Please visit the		
We may return forms completed incorrectly or with information missing.						correctly	forms page on the website at		
Please make sure you have remembered the following:					nemb	ered the	www.companieshouse.gov.uk		
☐ The company name and number match the information held on the public Register									
☐ You have	attac	hed t	he re	quire	d doc	uments			
☐ You have signed the form									
-									