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

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

1	Company details	
Company number	0 2 8 5 9 3 0 0	→ Filling in this form Please complete in typescript or in
Company name in full	Life's Too Short 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 0 3 3 A D	
Country		_
4	Liquidator's email address or telephone number •	• You must give an email address or
Email address	Lee.Death@btguk.com	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	

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6	Liquidator's name ⁰	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address 🛮	
Building 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		
County/Region		
Postcode		
Country		
8	Liquidator's email address or telephone number ⁹	You must give an email address or
Email address		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	\(\frac{1}{2} \) \(\frac{1}{7} \) \(\frac{1}{0} \) \(\frac{1}{3} \) \(\frac{1}{2} \) \(\frac{1}{3} \) \(\frac{1}{3} \)	
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	×
Signature date	$\begin{bmatrix} \frac{1}{2} & \frac{1}{2} & \frac{1}{0} & \frac{1}{2} & \frac{1}{2} & \frac{1}{2} & \frac{1}{2} & \frac{1}{2} & \frac{1}{3} \end{bmatrix}$	
Signature date		

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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.

<u>'</u>		
Contact name	Lee De'ath	
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 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