

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 2 9 8 4 6 3 5

Company name in full Ventserv Limited

→ Filling in this form

Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Amanda Janice

Surname Ireland

3 Liquidator's address

Building name/number Bank Chambers

Street 1 Central Avenue

Post town Sittingbourne

County/Region Kent

Postcode M E 1 0 4 A E

Country

4 Liquidator's email address or telephone number ^①

Email address

Telephone number 01795 433655

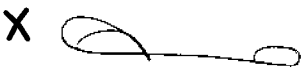
^① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 9 2 7 4

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6	Liquidator's name^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Alison Jane		
Surname	Collier		
7	Liquidator's address^②		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.
Building name/number	Bank Chambers		
Street	1 Central Avenue		
Post town	Sittingbourne		
County/Region	Kent		
Postcode	M E 1 0 4 A E		
Country			
8	Liquidator's email address or telephone number^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address			
Telephone number	01795 433655		
9	Insolvency practitioner number		
Number	1 2 2 5 2		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 0 6 m 1 0 y 2 0 2 0		
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	d 1 6 m 1 0 y 2 0 2 0		

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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	Alison Jane Collier									
Company name	mfw Insolvency & Corporate Recovery									
Address	Bank Chambers									
	1 Central Avenue									
Post town	Sittingbourne									
County/Region	Kent									
Postcode	M	E	1	0		4	A	E		
Country										
DX										
Telephone	01795 433655									



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