In accordance with Section 89 of the Insolvency Act 1986

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



FRIDAY

A26 11/10/2019
COMPANIES HOUSE

#334

1	Company details	1 11 11 11 11 11 11 11 11 11 11 11 11 1			
Company number	0 3 1 9 4 2 0 8	Filling in this form			
Company name in	GE Capital Rail Limited	Please complete in typescript or in bold black capitals.			
full					
2	Liquidator's name				
Full forename(s)	Richard				
Surname	Barker				
3	Liquidator's address				
Building name/number	1				
Street	More London Place				
Post town	London				
County/Region					
Postcode	S E 1 2 A F				
Country	United Kingdom				
4	Liquidator's email address or telephone number	You must give an email address or			
Email Address		telephone number All information on this form will appear on the public			
Telephone number	020 7951 2000	record			
5	Insolvency practitioner number				
Number	1 7 1 5 0				

600

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6	Liquidator's name							
Full forename(s)	Samantha	Other Liquidator's details Use this section to tell us about						
Surname	Keen	another liquidator.						
7	Liquidator's address							
Building name/numbe	er 1	Other Liquidator's details						
Street	More London Place	Use this section to tell us about another liquidator. Use the continuation page to tell						
Post town	London	us about more than two liquidators.						
County/Region								
Postcode	S E 1 2 A F							
Country	United Kingdom							
8	Liquidator's email address or telephone number	You must give an email address or						
Email Address		telephone number. All information on this form will appear on the public						
Telephone number	020 7951 2000	record						
9	Insolvency practitioner number							
Number	9 2 5 0							
10	Statement of appointment							
	I confirm the appointment of the liquidator(s) on							
Date	2 6 0 9 2 0 1 9							
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	l						
Liquidator's signature	Signature X Myacher	×						
Signature date	0 1 1 0 2 0 1 9							

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Present	er in	forr	natio	n			
You do not hav you do it will he on the form. The visible to searc	elp Co ne con	mpa tact i	nies H nform	ous atio	e if th n you	ereis	aquery
Contact name Kat	ya Va	sileva					
Company name Ernst	& Your	ng LLF	<u> </u>				
Address 1 More	Lond	on Pl	ace				
<u></u>							
Posttown Londo	n						
County/Region				<u> </u>			
Postcode	S	E	1		2	Α	F
Country United	L Kingd	om				1	<u> </u>
DX							
Telephone 020 7	951 34	427					
✓ Checklis	st						
We may return with informa				eted	inco	rrect	ly or

Please make sure you have remembered the

☐ The company name and number match the information held on the public Register.

You have signed the form.

following:

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