FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering

*Insert full name of company

of the Insolvency Act 1986

Pursuant to section 109 of the insolve	andy Act 1900		
To the Registrar of Companies (Address Overleaf)	For of	ficial use	Company number
Name of Company			
W A G Gibb Limited			·
Nature of Business			
I give notice that I have been appoint	ed liquidator of the above	company on 29 th	October 2015
The appointment was by Members			
Type of liquidation Members			
Name of Liquidator Office holder number Address Office holder number Off	ess Centre dward Road		
Signature Par		Date 9()	15
Name of Liquidator Office holder number Address			
Signature		Date	
Presenter's name and address and reference (If any) 178	For Official Use General Section	Post	room
lan Pattinson Pattinsons Insolvency Limited Kings Business Centre	\ \!		

90-92 King Edward Road Nuneaton

Warwickshire CV11 4BB

Time Critical Reference



A16

12/11/2015 COMPANIES HOUSE

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