600

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

Companies House

TUESDAY

A7YNAURC
A13   05/02/2019   #160
COMPANIES HOUSE

1   Company details

Company number	0 3 7 6 2 7 3 7
Company name in full	KOPHILL LIMITED

→ **Filling in this form**
Please complete in typescript or in bold black capitals.

2   Liquidator's name

Full forename(s)	Edwin D S
Surname	Kirker

3   Liquidator's address

Building name/number	Kirker & Co
Street	Centre 645
	2 Old Brompton Road
Post town	London
County/Region	
Postcode	S W 7 3 D Q
Country	

4   Liquidator's email address or telephone number ❶

Email address	info@kirker.co.uk
Telephone number	020 7580 6030

❶ 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	8 2 2 7

12/17 Version 1.0

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6 Liquidator's name ❶

Full forename(s)	
Surname	

7 Liquidator's address ❷

Building name/number	
Street	
Post town	
County/Region	
Postcode	
Country	

8 Liquidator's email address or telephone number ❸

Email address	
Telephone number	

9 Insolvency practitioner number

Number	

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date	3 1 0 1 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

Liquidator's signature	Signature X *[signature]* X

Signature date	0 1 0 2 2 0 1 9

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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

Company name Kirker & Co

Address

Post town

County/Region

Postcode

Country

DX

Telephone 020 7580 6030

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

600 - continuation page

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Company number	
Company name in full	

2　Liquidator's name

Full forename(s)	
Surname	

3　Liquidator's address

Building name/number	
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Post town	
County/Region	
Postcode	
Country	

4　Liquidator's email address or telephone number ❶

Email address	
Telephone number	

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

5　Insolvency practitioner number

Insolvency practitioner number	