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

A6LSP96P A14 22/12/2017

COMPANIES HOUSE

efer to

Company details → Filling in this form Company number 4 9 6 3 2 5 Please complete in typescript or in Company name in full Talos Securities Limited bold black capitals. Liquidator's name Full forename(s) John David Thomas Surname Milsom 3 Liquidator's address Building name/number 15 Street Canada Square Post town London County/Region Postcode 5 G Country **United Kingdom** Liquidator's email address or telephone number • You must give an email address or telephone number. All information **Email address** maria.french2@kpmg.co.uk on this form will appear on the public record. Telephone number 02076941757 Insolvency practitioner number Number

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6	Liquidator's name [©]		
Full forename(s)	Mark Jeremy	Other Liquidator's details Use this section to tell us about	
Surname	Orton	another liquidator.	
7	Liquidator's address @	-	
Building name/numbe	15	Other Liquidator's details	
Street	Canada Square	Use this section to tell us about another liquidator. Use the	
		continuation page to tell us about more than two liquidators.	
Post town	London		
County/Region			
Postcode	E 1 4 5 G L		
Country	United Kingdom		
8 Liquidator's email address or telephone number ³		You must give an email address	
Email address	maria.french2@kpmg co.uk	telephone number. All information	
Telephone number	02076941757	public record.	
9	Insolvency practitioner number		
Number	8 8 4 6		
10	Statement of appointment	 _	
	I confirm the appointment of the liquidator(s) on		
Date	$\lceil \overline{1} \rceil \rceil \lceil \overline{5} \rceil \rceil \lceil \overline{1} \rceil \lceil \overline{2} \rceil \rceil \lceil \overline{2} \rceil \rceil \lceil \overline{2} \rceil \rceil \lceil \overline{2} \rceil \rceil \rceil \sqrt[y]{1} \rceil \sqrt[y]{7}$		
11	Appointment details		
	The appointment was made by		
	(Tick one) ☑ Company		
	☐ Company ☐ Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type		
	☑ Members		
	☐ Creditors		
13	Sign and date	· · · · · · · · · · · · · · · · · · ·	
Liquidator's signature	Signature		
	× July	×	
ignature date	d 1 d 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 Maria French Company name KPMG LLP Address 15 Canada Square Post town London County/Region Postcode Ε 1 Country United Kingdom DX Telephone 02076941757 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