Please do not write in this margin

Please complete

legibly preferably in black type or bold block lettering

*Insert full name of company

FORM No 600

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

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies (Address Overleaf)		For official use		Company number
•				04298426
Name of Company				
* Thames Valley Satellite & AerialSystems Limited				
Nature of Business				
I/We give notice that i/We have been appointed liquidator(s) of the above company on 12 September 2013				
The appointment was made by Transfer Order of the Court dated 12 September 2013				
Type of Liquidation Credito	ors Voluntary			
Name of Liquidator Office holder number Address				
Signature			Date	
Name of Liquidator	David Clements			
Office holder number Address	008765 4 St Giles Court Southampton Street			
Signature	Reading RG1 2QL		Date	
Presentor's name and address and reference (If any) THAME001/2401/PRB/DC/JWH/LUG/ROB /C		Official Use eral Section	}	Post room
P R Boyle Harnsons Business Recover	ry and		ا الما	0110000
Insolvency Limited 4 St Giles Court			I INDIAN INTO INEC	ALL MALL MAINLE COLUMN LANGE MAIN (CAN 1841
Southampton Street			ΑΥ	
Reading RG1 2QL			THURSDAY	
Time Critical Reference			A37	*A2L58OQ1* 14/11/2013 #190 MPANIES HOUSE