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



Companies House

SATURDAY



A6ZHTKYY

A22

10/02/2018

#278

COMPANIES HOUSE

1 Company details

Company number 0 4 3 7 8 4 8 7

Company name in full Marine Power Ltd

→ Filling in this form

Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Andrew

Surname Dolliver

3 Liquidator's address

Building name/number EY

Street Bedford House

16 Bedford Street

Post town Belfast

County/Region Co. Antrim

Postcode B T 2 7 D T

Country

4 Liquidator's email address or telephone number ^①

Email address adolliver@uk.ey.com

Telephone number 028 9044 3500

^① 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 1 5 2 3 0

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6 Liquidator's name^①

Full forename(s) Joseph L

Surname Charleton

① Other Liquidator's details
Use this section to tell us about another liquidator

7 Liquidator's address^②

Building name/number EY

Street Bedford House

16 Bedford Street

Post town Belfast

County/Region Co Antrim

Postcode B T 2 7 D T

Country

② Other Liquidator's details
Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

8 Liquidator's email address or telephone number^③

Email address Luke.Charleton@ie.ey.com

Telephone number 028 9044 3500

③ You must give an email address or telephone number. All information on this form will appear on the public record.

9 Insolvency practitioner number

Number 1 2 9 1 0

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date 3 0 0 1 2 0 1 8

11 Appointment details

The appointment was made by
(Tick one)

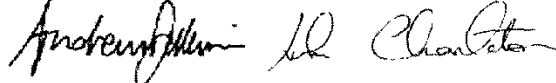
☒ Company☐ Creditors**12 Type of liquidation**

Tick to confirm the liquidation type

☒ Members☐ Creditors**13 Sign and date**

Liquidator's signature

Signature

X  X

Signature date 0 5 0 2 2 0 1 8

600 - continuation page

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1 Company details

Company number								
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Company name in full

2 Liquidator's name

Full forename(s)

Surname

3	Liquidator's address
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Building name/number

Street

Post town

County/Region

Postcode

Country

4 Liquidator's email address or telephone number ①

Email address

Telephone number

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

5	Insolvency practitioner number
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Insolvency practitioner number							
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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 **Maureen Scullion**

Company name **EY**

Address **Bedford House**

16 Bedford Street

Post town **Belfast**

County/Region

Postcode **B T 2 7 D T**

Country

DX

Telephone **028 9044 3612**

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