In accordance with section 109 of the Insolvency Act 1986 600

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



TUESDAY



\*E /WPC2CI\*
LD5 08/01/2019
COMPANIES HOUSE

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	nan Louise	
Surname Eva	ns	
3 Liqu	idator's address	
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Street Hav	annah Street	
Post town		
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Postcode C	F 1 0 5 S F	
Country		
4 Liqu	iquidator's email address or telephone number   You must give an email ad	
mail address beva	ans@menzies.co.uk	telephone number All informatio on this form will appear on the
Telephone number 020	7 387 5868	public record.
5 Inso	lvency practitioner number	
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Company   Comp	6	Liquidator's name •	
Surname    Liquidator's address		Liquidator's fiame *	Other Liquidator's details
Did by the confirmation of the liquidator's signature			Use this section to tell us about
Building name/number  Street  Street  Country  Rost town  County/Region  Postcode  Country  B Liquidator's email address or telephone number  Email address  Country			another liquidator.
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Country/Region Postcode Country  B Liquidator's email address or telephone number Email address Telephone number  9 Insolvency practitioner number Number 10 Statement of appointment I confirm the appointment of the liquidator(s) on Date	Street		another liquidator. Use the continuation page to tell us about
Postcode Country  8 Liquidator's email address or telephone number or telephone number relephone number. All information on this form will appear on the public record.  9 Insolvency practitioner number Number 10 Statement of appointment 1 confirm the appointment of the liquidator(s) on Date	Post town		
Email address  Email address  Insolvency practitioner number  Insolvency practitioner number  I confirm the appointment of the liquidator(s) on Date    Appointment details	County/Region		
Liquidator's email address or telephone number   Poyou must give an email address or telephone number   Poyou must give an email address or telephone number. All information on this form will appear on the public record.	Postcode		
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Email address Telephone number    Insolvency practitioner number   Insolvency practitioner number   Itelephone   Iteleph	8	Liquidator's email address or telephone number <sup>©</sup>	You must give an email address or
Insolvency practitioner number   Public record.	Email address		telephone number. All information
Number    Statement of appointment   I confirm the appointment of the liquidator(s) on     Date   d 2   d 1   d 2   v 2   v 0   v 1   v 8     11	Telephone number		
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Date    d 2   d 1   d 2   v 2   v 0   v 1   v 8	10	Statement of appointment	
Appointment details  The appointment was made by (Tick one) Company Creditors  Type of liquidation  Tick to confirm the liquidation type Members Creditors  Sign and date  Liquidator's signature  X  X  X			
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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 Laura Donovan Company name Menzies LLP Address Lynton House 7-12 Tavistock Square Post town County/Region London

✓ Checklist

Postcode

Country

Telephone

DX

We may return forms completed incorrectly or with information missing.

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0207 387 5868

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