In accordance with section 109 of the Insolvency Act 1986 600

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



HURSDAY



A11

29/03/2018 COMPANIES HOUSE

#305

to

1	Con	пра	ny d	etai	ls						
Company number	0	4	5	7	0	2	5	7	→ Filling in this form Please complete in typescript or in		
Company name in full	Xlp	ro L	imite	d		bold black capitals.					
2	Liqu	ıida	tor's	na	me						
Full forename(s)	Ste	phe	n Ro	land							
Surname	Bro	wne	9								
3	Liqu	ıida	tor's	ad	dres	S					
Building name/number	Ath	ene	Plac	e							
Street	66	Sho	e La	ne							
Post town	London .										
County/Region											
Postcode	E C 4 A 3 B Q										
Country	Uni	United Kingdom									
4	Liquidator's email address or telephone number • O You must give an email addre						• You must give an email address or				
Email address	telephone								telephone number. All information on this form wilf appear on the		
Telephone number	+44 (0) 20 7303 6688 public record.										
5	Ins	olve	ency	pra	ctiti	one	r nu	mber			
Number	0	0	9	2	8	1					

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6	Liquidator's name ⁰								
Full forename(s)	lan Harvey	Other Liquidator's details Use this section to tell us about							
Surname	Dean	another liquidator.							
7	Liquidator's address ®								
Building name/number	Athene Place	Other Liquidator's details							
Street	66 Shoe Lane	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 C 4 A 3 B Q								
Country	United Kingdom								
8	Liquidator's email address or telephone number swaringmitchell@deloitte co.uk +44 (0) 20 7303 6688 Pou must give an email address o telephone number. All informatio on this form will appear on the public record.								
Email address									
Telephone number									
9	Insolvency practitioner number								
Number	0 0 9 4 6 2								
10	Statement of appointment								
	I confirm the appointment of the liquidator(s) on								
Date	^d 2 ^d 7 ^m 0 ^m 3 ^y 2 ^y 0 ^y 1 ^y 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								
and and a signature	X//	X							
	lef .								
Signature date	o'2 o'8 m'0 m'3 y 2 y 0 y 1 y 8								
		·							

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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	Sean Waring Mitchell
Company name	Deloitte LLP
Address	Athene Place, 66 Shoe Lane
Post town	London
County/Region	
Postcode	E C 4 A 3 B Q United Knydom
Country	United Frydom
DX	
Telephone	+44 (0) 20 7303 6688

✓ 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