In accordance with section 109 of the Insolvency Act 1986 600



Companies House

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

A96E1NLE
A05 02/06/2020 #183
COMPANIES HOUSE

. ,	Company details	
ompany number	0 4 9 1 7 2 9 1	→ Filling in this form Please complete in typescript or in
ompany name in full	SPIKES CAVELL ANALYTIC LIMITED	bold black capitals.
	Liquidator's name	
ull forename(s)	IAN HARVEY	
ırname ,	DEAN	
	Liquidator's address	
uilding name/number	DELOITTE LLP	
reet	1 NEW STREET SQUARE	
÷		
ost town	LONDON	
ounty/Region		
ostcode	EC4A3HQ	
ountry	UNITED KINGDOM	
•	• You must give an email address o	
mail address	swaringmitchell@deloitte.co.uk	telephone number. All informatio on this form will appear on the public record.
elephone number	+44 (0) 20 7303 6688	
	Insolvency practitioner number	
umber	0 0 9 4 6 2	
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6	Liquidator's name [©]		
Full forename(s)	STEPHEN ROLAND	Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	BROWNE		
7	Liquidator's address @		
Building name/number	DELOITTE LLP	Other Liquidator's details	
Street	1 NEW STREET 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		ı.	
Postcode	EC4A3HQ		
Country	UNITED KINGDOM		
8	Liquidator's email address or telephone number [©]	You must give an email address or	
Email address	swaringmitchell@deloitte.co.uk	telephone number. All information on this form will appear on the public record	
Telephone number	+44 (0) 20 7303 6688		
9	Insolvency practitioner number		
Number	0 0 9 2 8 1		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date .	^d 2 ^d 1 ^m 0 ^m 5 ^y 2 ^y 0 ^y 2 ^y 0		
11	Appointment details	•	
	The appointment was made by		
A y	(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 &		
Signature date	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		

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

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 1 NEW STREET SQUARE

Post town LONDON

County/Region

Postcode E C 4 A 3 H Q

Country UNITED KINGDOM

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.

f 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