In accordance with section 109 of the Insolvency Act 1986

600



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



ase refer to

iuse

	Company details								
Company number	0 5 1 4 8 2 3 7	→ Filling in this form Please complete in typescript or in							
Company name in full	Lloyds Bank Leasing (No. 8) Limited	bold black capitals.							
2	Liquidator's name	, 300 mm m							
Full forename(s)	Richard								
Surname	Barker								
3	Liquidator's address								
Building name/number	1								
Street	More London Place								
Post town		Manufa dell'Amballanda della d							
County/Region	London								
Postcode	S E 1 2 A F								
Country	United Kingdom	· remarks control							
4	Liquidator's email address or telephone number •	You must give an email address or							
Email address		telephone number. All informatio on this form will appear on the							
Telephone number	020 7951 2000	public record.							
5	Insolvency practitioner number								
Number	1 7 1 5 0								

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6	Liquidator's name [©]								
Full forename(s)	Samantha Jane	Other Liquidator's details Use this section to tell us about							
Surname	Keen	another liquidator.							
7	Liquidator's address @								
Building name/number	1	Other Liquidator's details							
Street	More London Place	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.							
Post town									
County/Region	London								
Postcode	SE12AF								
Country	United Kingdom								
8	Liquidator's email address or telephone number [©]	You must give an email address or							
Email address		telephone number. All information on this form will appear on the							
Telephone number	020 7951 2000	public record.							
9	Insolvency practitioner number								
Number	9 2 5 0								
10	Statement of appointment								
	I confirm the appointment of the liquidator(s) on								
Date	d d d d d d d d d d d d d d d d d d d								
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 Magneline	×							
Signature date	$\begin{bmatrix} 1 & & & & & \\ 0 & & & & & \end{bmatrix}$ $\begin{bmatrix} 0 & & & \\ 0 & & & \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ 0 & & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ 0 & & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ 0 & & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ 0 & & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ 0 & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & & \\ & & \\ \end{bmatrix}$ $\begin{bmatrix} 0 & $								

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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	Jack Collis							
Company name Ernst & Young LLP								
Address	1							
More L	More London Place							
Post town								
County/Region	London							
Postcode	S E 1 2 A F							
Country	United Kingdom							
DX								
Telephone	020 7951 5925							

✓ 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.

T 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

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600 - continuation page Notice of appointment of liquidator in a members' or creditors' voluntary winding up

1	Con	npa	ny c	leta	ils						
Company number									-		
Company name in full								************			
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2	Liqu	uida	tor'	s na	me						
Full forename(s)											
Surname											
3	Liqu	uida	ator'	s ac	ldres	S					
Building name/number											
Street											
Post town											
County/Region									-		
Postcode											
Country	1										
4	Liqu	uida	ator'	s en	nail	addı	ress	or t	elephone number •		
Email address											• You must give an email address or telephone number. All information
Telephone number											on this form will appear on the public record.
5	Insc	 olve	ncv	pra	ctiti	oner	nui	nbe	r		pasitive of
Insolvency practitioner										Γ	
number	1	1	ı	ı	ı	1	1	ŧ			