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



Companies House

MONDAY



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28/02/2022

#152

COMPANIES HOUSE

1 Company details

Company number 0 5 2 8 9 9 1 3

Company name in full Cazenove IP Limited

→ Filling in this form

Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Simon David

Surname Chandler

3 Liquidator's address

Building name/number Mazars LLP

Street 1st Floor

Two Chamberlain Square

Post town Birmingham

County/Region

Postcode B 3 3 A X

Country

4 Liquidator's email address or telephone number ^①

Email address

Telephone number 0121 232 9500

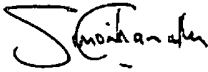
^① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 0 0 8 8 2 2

600

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6 Liquidator's name^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)		
Surname		
7 Liquidator's address^②		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.
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
8 Liquidator's email address or telephone number^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address		
Telephone number		
9 Insolvency practitioner number		
Number		
10 Statement of appointment		
I confirm the appointment of the liquidator(s) on		
Date	^d 1 ^d 5 ^m 0 ^m 2 ^y 2 ^y 0 ^y 2 ^y 2	
11 Appointment details		
The appointment was made by (Tick one)		
<input checked="" type="checkbox"/> Company		
<input type="checkbox"/> Creditors		
12 Type of liquidation		
Tick to confirm the liquidation type		
<input checked="" type="checkbox"/> Members		
<input type="checkbox"/> Creditors		
13 Sign and date		
Liquidator's signature	Signature X  X	
Signature date	^d 1 ^d 8 ^m 0 ^m 2 ^y 2 ^y 0 ^y 2 ^y 2	

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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

Company name

Mazars LLP

Address

1st Floor

Two Chamberlain Square

Post town

Birmingham

County/Region

Postcode

B 3 3 A X

Country

DX

Telephone

0121 232 9500

**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