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



Companies House

WEDNESDAY



A8Z4LW7L

A09

19/02/2020

#195

COMPANIES HOUSE

1 Company details

Company number 0 5 4 9 3 0 4 0

Company name in full International Autograph Auctions Limited

→ Filing in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) John

Surname Harlow

3 Liquidator's address

Building name/number 29 New Walk

Street Leicester

Post town LE1 6TE

County/Region

Postcode

Country

4 Liquidator's email address or telephone number ^①

Email address

Telephone number 0116 275 5021

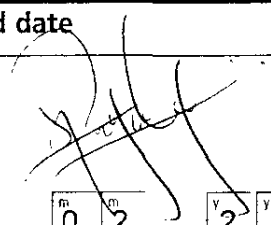
① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 8 3 1 9

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 <i>continuation page</i> 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	<div>d</div> <div>1</div> <div>d</div> <div>4</div> <div>m</div> <div>0</div> <div>m</div> <div>2</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>0</div>		
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 type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature 		
Signature date	<div>d</div> <div>1</div> <div>d</div> <div>7</div> <div>m</div> <div>0</div> <div>m</div> <div>2</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>0</div>		

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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	Donna Lee								
Company name	John Harlow Insolvency and Corporate Recovery								
Address	29 New Walk Leicester								
Post town	LE1 6TE								
County/Region									
Postcode	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
Country									
DX									
Telephone	0116 275 5021								

**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