In accordance with section 109 of the Insolvency Act 1986

# 600



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



	For fi	irther information, please refer to		
	FRIDAY	*A7EHOYN6* 14/09/2018 #85		
1	Company details	DMPANIES HOUSE		
Company number	0 5 4 9 9 0 0 9	→ Filling in this form Please complete in typescript or in		
Company name in full	Alvos Oncology Limited	bold black capitals		
2	Liquidator's name			
Full forename(s)	Timothy John Edward			
Surname	Dolder			
3	Liquidator's address			
Building name/number	1 Radian Court			
Street	Knowlhill			
Post town	Milton Keynes			
County/Region				
Postcode	M K 5 8 P J			
Country				
4	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	01908 087220	public record.		
5	Insolvency practitioner number			
Number	9 0 0 8			
	<del></del>			

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						of li	iquic	lator	r in	a me	embe	ers' or	creditor	s'	
	volun	tary	wind	ling i	up										
6	Liqui	dato	r's n	ame		•							·		
Full forename(s)	Gar	eth D	avid	•											Other Liquidator's details     Use this section to tell us     about another liquidator
Surname	Wil	сох								•					,
7	Liqui	dato	r's a	ddre	ess	•			•						
Building name/number	1 R	adian	Cour	t	·										Other Liquidator's details
Street	Kno	owlhil	l 												Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town	Mil	Milton Keynes										·			
County/Region		·				· · <del>- · ·</del>									
Postcode	М	К	5		8	Р	J								
Country			1												
8	Liqui	idato	r's e	mai	ade	dres	s or	tele	pho	ne r	umk	ber	•		
Email address		Liquidator's email address or telephone number								<ul> <li>You must give an email address or telephone number. All information on this form wil!</li> </ul>					
Telephone number	013	0121 222 4140											appear on the public record		
9	Inso	lven	y pr	actit	ione	er no	umb	er							
Number	2	1	0	5	2										
10	State	emei	nt of	app	oint	mer	nt	J							
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	l con	ifirm t	he ap	poin	tmen	t of t	the lu	quida	tor(	s) on					
Date	1	1		0	9		2	0	1	8					
11	App	ointr	nent	det	ails										
		Comp Credit	ors	was.	mad	e bv									
	4	٠,١١١٠			.,,,,,,	,									

12	Type of liquidation	
	☐ Members	
	☐ Creditors	
13	Tick to confirm the liquidation type  Sign and date	
Liquidator's signature	x ///// x	
Signature date	Signature	

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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. Timothy John Edward Dolder Opus Restructuring LLP 1 Radian Court Knowlhill Milton Keynes Postcode Κ 01908 087220 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