

600

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



Companies House

THURSDAY



A24 *A72RVQ1K*
29/03/2018 #252
COMPANIES HOUSE

fer to

1 Company details

Company number 0 5 6 2 3 1 1 9

Company name in full Smart Public Limited

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

2 Liquidator's name

Full forename(s) Samantha Jane

Surname Keen

3 Liquidator's address

Building name/number 1

Street More London Place

Post town

County/Region London

Postcode S E 1 2 A F

Country United Kingdom

4 Liquidator's email address or telephone number ^①

Email address skeen@uk ey com

Telephone number 020 7951 7902


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 9 2 5 0

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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)	Richard		
Surname	Barker		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.
7	Liquidator's address ^②		
Building name/number	1		
Street	More London Place		
Post town			
County/Region	London		
Postcode	S E 1 2 A F		
Country			③ You must give an email address or telephone number. All information on this form will appear on the public record
8	Liquidator's email address or telephone number ^③		
Email address	rbarker@uk.ey.com		
Telephone number	020 7951 9128		
9	Insolvency practitioner number		
Number	1 7 1 5 0		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 1 9 m 0 3 y 2 0 y 1 8		
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 		
Signature date	d 2 1 m 0 3 y 2 0 y 1 8		

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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 **Rebecca Cohring**

Company name **Ernst & Young LLP**

Address **1**

More London Place

Post town

County/Region **London**

Postcode **S E 1 2 A F**

Country **United Kingdom**

DX

Telephone **020 7951 9468**



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

600 - continuation page

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voluntary winding up

1 Company details

Company number	<input type="text"/>	
Company name in full	<input type="text"/>	

2 Liquidator's name

Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	

3 Liquidator's address

Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	

4 Liquidator's email address or telephone number ¹

Email address	<input type="text"/>	¹ You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	

5 Insolvency practitioner number

Insolvency practitioner number	<input type="text"/>	
	<input type="text"/>	