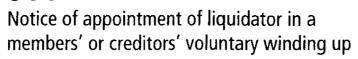
In accordance with section 109 of the Insolvency Act 1986

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**COMPANIES HOUSE** 

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1	Company details	
Company number	0 5 6 5 8 0 2 0	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	AIMES GRID SERVICES COMMUNITY INTEREST COMPANY	
2	Liquidator's name	
Full forename(s)	JEAN MCKAY	
Surname	ELLIS	
3	Liquidator's address	
Building name/number	CASTLE CHAMBERS	
Street	43 CASTLE STREET	
Post town	LIVERPOOL	
County/Region		
Postcode	L 2 9 T L	
Country		
Liquidator's email address or telephone number •		• You must give an email address or
Email address	jme@dsg.uk.com	telephone number. All information on this form will appear on the public record.
Telephone number	0151 243 1200	
5	Insolvency practitioner number	
Number	9 3 1 8	

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6	Liquidator's name <sup>©</sup>		
Full forename(s)		Other Liquidator's details Use this section to tell us about	
Surname		another liquidator,	
7	Liquidator's address o		
Building name/numbe	er	Other Liquidator's details	
Street		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			
Postcode			
Country			
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		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
11	Appointment details		
	The appointment was made by (Tick one)		
	□ Company □ Creditors		
12	Type of liquidation	1	
_	Tick to confirm the liquidation type  Members Creditors		
13	Sign and date		
Liquidator's signature	Signature X J. CO	X	
Signature date	$\begin{bmatrix} 1 & & & & \\ & 1 & & 2 & & \end{bmatrix} \begin{bmatrix} m_0 & m_7 & & & \end{bmatrix} \begin{bmatrix} y_2 & y_0 & y_1 & y_9 \end{bmatrix}$		

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Notice of appointment of liquidator in a members' or creditors' 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 LYN WILLIAMS DSG ACCOUNTANCY AND **BUSINESS SERVICES LIMITED** Address **CASTLE CHAMBERS** 43 CASTLE STREET Post town LIVERPOOL County/Region Postcode 2 Т Country DX Telephone 0151 243 1236 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