

FORM No. 600

**G**

# **Notice of appointment of liquidator Voluntary winding up (Members or Creditors)**

**600****CHWP000**Please do not write in  
this marginPlease complete  
legibly preferably in  
black type or bold  
block lettering\* Insert full name of  
company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies  
(Address overleaf)

For official use

Company Number

--	--	--

06013910

Name of Company

\* Orthodontics Plus Limited

Nature of business

Dental practice activities

I/We give notice that I/We have been appointed liquidator(s) of the above company on 28 November 2013

The appointment was by

Type of liquidation Members

Name of Liquidator	Peter Richard Dewey
Office holder number	007806
Address	5th Floor Riverside House 31 Cathedral Road Cardiff

Signature

Date 28/11/2013

Name of Liquidator	David Hill
Office holder number	006904
Address	5th Floor, Riverside House 31 Cathedral Road Cardiff

Signature

Date 28/11/13

Presenter's reference, name and address  
(if any)

OR020MVL  
Begbies Traynor (Central) LLP  
5th Floor  
Riverside House  
31 Cathedral Road  
Cardiff

Time Critical Reference

For Official Use  
General Section

Post room

WEDNESDAY



\*A2MHZDG3\*

A21

04/12/2013

#83

COMPANIES HOUSE