

In accordance with  
Section 109 of the  
Insolvency Act 1986.

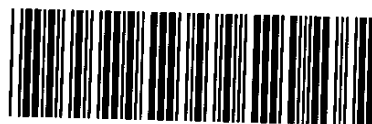
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## Notice of appointment of liquidator in a members' or creditors' voluntary winding up



Companies House

SATURDAY



A45 \*A7LC1G5F\* 22/12/2018 #281  
COMPANIES HOUSE

|                      |                                                         |   |   |   |   |   |   |   |  |                                                                                                                                      |
|----------------------|---------------------------------------------------------|---|---|---|---|---|---|---|--|--------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b>             | <b>Company details</b>                                  |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Company number       | 0                                                       | 6 | 1 | 6 | 3 | 5 | 7 | 6 |  |                                                                                                                                      |
| Company name in full | Novera Energy Limited                                   |   |   |   |   |   |   |   |  | <b>→Filling in this form</b><br>Please complete in typescript<br>or in bold black capitals.                                          |
|                      |                                                         |   |   |   |   |   |   |   |  |                                                                                                                                      |
| <b>2</b>             | <b>Liquidator's name</b>                                |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Full forename(s)     | Nicholas James                                          |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Surname              | Timpson                                                 |   |   |   |   |   |   |   |  |                                                                                                                                      |
| <b>3</b>             | <b>Liquidator's address</b>                             |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Building name/number | KPMG LLP                                                |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Street               | 8 Princes Parade                                        |   |   |   |   |   |   |   |  |                                                                                                                                      |
|                      |                                                         |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Post town            | Liverpool                                               |   |   |   |   |   |   |   |  |                                                                                                                                      |
| County/Region        |                                                         |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Postcode             | L                                                       | 3 |   | 1 | Q | H |   |   |  |                                                                                                                                      |
| Country              | United Kingdom                                          |   |   |   |   |   |   |   |  |                                                                                                                                      |
| <b>4</b>             | <b>Liquidator's email address or telephone number ①</b> |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Email address        | carolyn.foden@kpmg.co.uk                                |   |   |   |   |   |   |   |  | <b>①</b> You must give an email<br>address or telephone number. All<br>information on this form will<br>appear on the public record. |
| Telephone number     | 0151 473 5132                                           |   |   |   |   |   |   |   |  |                                                                                                                                      |
| <b>5</b>             | <b>Insolvency practitioner number</b>                   |   |   |   |   |   |   |   |  |                                                                                                                                      |
| Number               | 2                                                       | 0 | 6 | 1 | 0 |   |   |   |  |                                                                                                                                      |

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voluntary winding up

|                        |                                                                                                                                |                                                                                                                                                                    |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6</b>               | <b>Liquidator's name ①</b>                                                                                                     |                                                                                                                                                                    |
| Full forename(s)       | Mark Jeremy                                                                                                                    | <b>① Other Liquidator's details</b><br>Use this section to tell us about another liquidator.                                                                       |
| Surname                | Orton                                                                                                                          |                                                                                                                                                                    |
| <b>7</b>               | <b>Liquidator's address ②</b>                                                                                                  |                                                                                                                                                                    |
| Building name/number   | KPMG LLP                                                                                                                       | <b>② Other Liquidator's details</b><br>Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators. |
| Street                 | 8 Princes Parade                                                                                                               |                                                                                                                                                                    |
| Post town              | Liverpool                                                                                                                      |                                                                                                                                                                    |
| County/Region          |                                                                                                                                |                                                                                                                                                                    |
| Post code              | L 3 1 Q H                                                                                                                      |                                                                                                                                                                    |
| Country                | United Kingdom                                                                                                                 |                                                                                                                                                                    |
| <b>8</b>               | <b>Liquidator's email address or telephone number ③</b>                                                                        |                                                                                                                                                                    |
| Email address          | carolyn.foden@kpmg.co.uk                                                                                                       | <b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>                                        |
| Telephone number       | 0151 473 5132                                                                                                                  |                                                                                                                                                                    |
| <b>9</b>               | <b>Insolvency practitioner number</b>                                                                                          |                                                                                                                                                                    |
| Number                 | 8 8 4 6                                                                                                                        |                                                                                                                                                                    |
| <b>10</b>              | <b>Statement of appointment</b>                                                                                                |                                                                                                                                                                    |
|                        | I confirm the appointment of the liquidator(s) on                                                                              |                                                                                                                                                                    |
| Date                   | 1 9 1 2 2 0 1 8                                                                                                                |                                                                                                                                                                    |
| <b>11</b>              | <b>Appointment details</b>                                                                                                     |                                                                                                                                                                    |
|                        | The appointment was made by<br>(Tick one)<br><input checked="" type="checkbox"/> Company<br><input type="checkbox"/> Creditors |                                                                                                                                                                    |
| <b>12</b>              | <b>Type of liquidation</b>                                                                                                     |                                                                                                                                                                    |
|                        | Tick to confirm the liquidation type<br><input checked="" type="checkbox"/> Members<br><input type="checkbox"/> Creditors      |                                                                                                                                                                    |
| <b>13</b>              | <b>Sign and date</b>                                                                                                           |                                                                                                                                                                    |
| Liquidator's signature | Signature<br><br>x                          |                                                                                                                                                                    |
| Signature date         | 1 9 1 2 2 0 1 8                                                                                                                |                                                                                                                                                                    |

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|                                                                                                                                                                                                                         |           |                                                                                                                                                                                                                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Presenter information</b>                                                                                                                                                                                            |           | <b>Important information</b>                                                                                                                                                                                                                           |  |
| <p>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.</p> |           | <p><b>All information on this form will appear on the public record.</b></p>                                                                                                                                                                           |  |
| <p>Contact name Carolyn Foden</p>                                                                                                                                                                                       |           | <b>Where to send</b>                                                                                                                                                                                                                                   |  |
| <p>Company name KPMG LLP</p>                                                                                                                                                                                            |           | <p><b>You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:</b></p>                                                                                                         |  |
| <p>Address 8 Princes Parade</p>                                                                                                                                                                                         |           | <p>The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ.<br/>DX 33050 Cardiff.</p>                                                                                                                                         |  |
| <p>Post town Liverpool</p>                                                                                                                                                                                              |           | <b>Further information</b>                                                                                                                                                                                                                             |  |
| <p>County/Region</p>                                                                                                                                                                                                    |           | <p>For further information, please see the guidance notes on the website at <a href="http://www.companieshouse.gov.uk">www.companieshouse.gov.uk</a> or email <a href="mailto:enquiries@companieshouse.gov.uk">enquiries@companieshouse.gov.uk</a></p> |  |
| Postcode                                                                                                                                                                                                                | L 3 1 Q H | <p><b>This form is available in an alternative format. Please visit the forms page on the website at <a href="http://www.companieshouse.gov.uk">www.companieshouse.gov.uk</a></b></p>                                                                  |  |
| <p>Country United Kingdom</p>                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                        |  |
| <p>DX</p>                                                                                                                                                                                                               |           |                                                                                                                                                                                                                                                        |  |
| <p>Telephone 0151 473 5132</p>                                                                                                                                                                                          |           |                                                                                                                                                                                                                                                        |  |
| <b>Checklist</b>                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                        |  |
| <p><b>We may return forms completed incorrectly or with information missing.</b></p>                                                                                                                                    |           |                                                                                                                                                                                                                                                        |  |
| <p><b>Please make sure you have remembered the following:</b></p>                                                                                                                                                       |           |                                                                                                                                                                                                                                                        |  |
| <p><input type="checkbox"/> The company name and number match the information held on the public Register.</p>                                                                                                          |           |                                                                                                                                                                                                                                                        |  |
| <p><input type="checkbox"/> You have attached the required documents.</p>                                                                                                                                               |           |                                                                                                                                                                                                                                                        |  |
| <p><input type="checkbox"/> You have signed the form.</p>                                                                                                                                                               |           |                                                                                                                                                                                                                                                        |  |