

# 600

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



Companies House



A05 \*A7LTS1AB\* #457  
29/12/2018  
COMPANIES HOUSE

SATURDAY

### 1 Company details

Company number 0 6 4 8 1 3 2 2  
Company name in full Right Document Solutions Holdings Limited

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

### 2 Liquidator's name

Full forename(s) Richard  
Surname Barker

### 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 <sup>①</sup>

Email address Rbarker@uk.ey.com  
Telephone number 020 7951 9128


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 1 7 1 5 0

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<b>6</b>	<b>Liquidator's name <sup>①</sup></b>		<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)	Samantha Jane		
Surname	Keen		
<b>7</b>	<b>Liquidator's address <sup>②</sup></b>		<b>② Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	1		
Street	More London Place		
Post town			
County/Region	London		
Postcode	S E 1 2 A F		
Country	United Kingdom		
<b>8</b>	<b>Liquidator's email address or telephone number <sup>③</sup></b>		<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>
Email address	skeen@uk.ey.com		
Telephone number	020 795 17902		
<b>9</b>	<b>Insolvency practitioner number</b>		
Number	9 2 5 0		
<b>10</b>	<b>Statement of appointment</b>		
	I confirm the appointment of the liquidator(s) on		
Date	d 2 d 0 m 1 m 2 y 2 y 0 y 1 y 8		
<b>11</b>	<b>Appointment details</b>		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
<b>12</b>	<b>Type of liquidation</b>		
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors		
<b>13</b>	<b>Sign and date</b>		
Liquidator's signature	Signature 		X
Signature date	d 2 d 0 m 1 m 2 y 2 y 0 y 1 y 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	Robert Forster
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 7760 9293

**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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)

## 600 - continuation page

Notice of appointment of liquidator in a members' or creditors'  
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### 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 <sup>❶</sup>

Email address	<input type="text"/>	<b>❶</b> 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"/>	
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