In accordance with section 109 of the Insolvency Act 1986 '



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

THURSDAY	*A7L6OXUW*	
	 20/12/2018	#3

COMPANIES HOUSE

to

**Company details** 6 5 2 → Filling in this form Company number 3 2 6 6 Please complete in typescript or in bold black capitals. Company name in full Big Screen Productions 4 Limited Liquidator's name Full forename(s) Lloyd Surname Hinton Liquidator's address Building name/number 4th Floor Allan House Street 10 John Princes Street Post town London County/Region Postcode G 0 Α Н Country Liquidator's email address or telephone number • • You must give an email address or telephone number. All information **Email address** on this form will appear on the public record. Telephone number 02074952348 Insolvency practitioner number 9 5 1 6 Number

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

6	Liquidator's name <sup>0</sup>			
Full forename(s)		Other Liquidator's details		
Surname		Use this section to tell us about another liquidator.		
7	Liquidator's address o			
Building name/number		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	<del></del>		
Number				
10	Statement of appointment			
<del></del>	I confirm the appointment of the liquidator(s) on			
Date	$\begin{bmatrix} d & 1 & d & 1 \end{bmatrix}$ $\begin{bmatrix} m & 1 & m & 2 \end{bmatrix}$ $\begin{bmatrix} y_2 & y_0 & y_1 & y_8 \end{bmatrix}$			
11	Appointment details			
	The appointment was made by (Tick one)  ☐ Company ☐ Creditors			
12	Type of liquidation	· · · · · · · · · · · · · · · · · · ·		
	Tick to confirm the liquidation type  ☐ Members ☐ Creditors			
13	Sign and date			
Liquidator's signature	Signature  X  m  a  y  y  y  y  y  y  y  y  y  y  y  y	×		
	1 1 2 20 1 8			

#### 600

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	Jero	ome	Mira	nda					
Company name	Insc	lve F	Plus	Ltd					
				•	-				
Address 4th Floor Allan House									
10 John Princes Street									
Post town	London								
County/Region									
Postcode		W	1	G		0	Α	Н	
Country							-		
DX									
Telephone	020	7495	234	8	•				

# ✓ 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