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CHWP000

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors) 600

Company number

Please do not Write in this margin Pursuant to section 109 of the Insolvency Act 1986

Please complete legibly preferably in black type or bold block lettering To the Registrar of Companies For official use (Address Overleaf)

		065	57523	

Name of Company

Sakaram Limited

Nature of Business

Medical Consultant Services

I give notice that I have been appointed Liquidator of the above company on 3 April 2014

by the Members and creditors of the Company

Type of liquidation Members Voluntary Liquidation

Name of Liquidator Office holder number	Mark Bowen 8711		
Address	MB Insolvency, Hillcairnie House, St Andrews Road, Droitwich, WR9 8DJ		
Signature		Date 3 April 2014	

Presentor's name and address and reference (If any)
SAK01
Mark Bowen
MB Insolvency
Hillcairnie House
St Andrews Road
Droitwich
WR9 8DJ
Time Critical Reference

For Official Use General Section Post room

FRIDAY

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11/04/2014 COMPANIES HOUSE #63