FORM No. 600

CHFP080

Please do not Write in this margin

Voluntary winding up (Members or Creditors)

Notice of appointment of liquidator

Please complete Legibly preferably

In black type or bold block lettering \*Insert full name ot company

Pursuant to section 109 of the Insolvency Act 1986			
To the Registrar of Com (Address Overleaf)	panies	For official use	Company number
Name of Company			
* Buy Sofas Online Ltd			<del></del>
Nature of Business			
Online sale of sofas			
The appointment was by	Members and confirmed by ditors' Voluntary Liquidation		25 March 2015
Name of Liquidator Office holder number Address	Neil Charles Money 8900 39 Castle Street Leicester LE1 5WN		
Signature X		Date	27 March 2015
Name of Liquidator Office holder number Address			
Signature		Date	27 March 2015

Presentor's name and address and reference (If any) 002323 Neil Charles Money CBA 39 Castle Street Leicester

Time Critical Reference

LE15WN

For Official Use General Section

Post room

A29 01/04/2015 **COMPANIES HOUSE**