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

A1



12 28/02/2018 COMPANIES HOUSE

#285

1	Com	ıpar	ıy	deta	ils						
Company number	0	7	6	3	3	9	5	4	→ Filling in this form Please complete in typescript or in		
Company name in full	Vancouver Midco 2 Limited							bold black capitals			
2	Liquidator's name										
Full forename(s)	Tere	nce	G	uy							
Surname	Jackson										
3	Liqu	idaf	tor	's ac	dres	S					
Building name/number	Third Floor One London Square Cross Lanes										
Street											
Post town	Guildford										
County/Region											
Postcode	G	U	1		1	U	N				
Country											
4	Liquidator's email address or telephone number •				addı	or telephone number •	• You must give an email address or				
Email address	resti	uctu	ırir	ıg.gu	ildfor	d@r	smul	k.com	telephone number All information on this form will appear on the public record		
Telephone number	0148	33 3	07	000							
5	Insc	lve	nc	y pra	ctiti	one	r nu	mber			
Number	1	6	4	5	0						

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6	Liquidator's name [©]							
Full forename(s)	Matthew	Other Liquidator's details Use this section to tell us about						
Surname	Wild /	another liquidator.						
7	Liquidator's address ®	·						
Building name/number		Other Liquidator's details						
Street	25 High Street Crawley	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.						
Post town	West Sussex							
County/Region	/							
Postcode	R H 1 0 1 B G							
Country								
8	Liquidator's email address or telephone number ⁹	You must give an email address or						
Email address	restructuring.gatwick@rsmuk.com	telephone number All information on this form will appear on the						
Telephone number	0845 057 0700 public record.							
9	Insolvency practitioner number							
Number	9 3 0 0							
10	Statement of appointment							
	I confirm the appointment of the liquidator(s) on							
Date	$\begin{bmatrix} d & 1 & d & 9 \end{bmatrix}$ $\begin{bmatrix} m & 0 & 2 & 2 & y & 0 & y & 1 & y & 8 & 1 \end{bmatrix}$							
11	Appointment details							
	The appointment was made by (Tick one) ☑ Company ☐ Creditors							
12	Type of liquidation	<u> </u>						
_	Tick to confirm the liquidation type ☑ Members □ Creditors							
13	Sign and date							
Liquidator's signature	Signature X Gag Gal	X						
Signature date	$\begin{bmatrix} d & 2 & 4 \end{bmatrix}$ $\begin{bmatrix} m & 0 & m $							

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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	Terence Guy Jackson
Сотрану пате	RSM Restructuring Advisory LLP
Address	Third Floor
Post town County/Region	Guildford
Postcode	G U 1 1 U N
DX	
Telephone	01483 307000

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

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600 - continuation page

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1	Company details	
Company number		
Company name in full		
Company name in full		
2	Liquidator's name	
Full forename(s)		
Surname		_
3	Liquidator's address	
Building name/number		
Street	· 	
Post town		_
County/Region		_
Postcode		
Country		_
4	Liquidator's email address or telephone number	
Email address		• You must give an email address or
Telephone number		telephone number All information on this form will appear on the
		public record
	Insolvency practitioner number	
Insolvency practitioner number		