In accordance with section 109 of the Insolvency Act 1986

## 600



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

FRIDAY



16/03/2018 COMPANIES HOUSE

#274

1	Co	mp	oa	ny d	letai	ls					
Company number	(	, [	7	9	1	7	7	9	3	Filling in this form	
Company name in full	Si	lvei	rla	ke C	Const	ructio	on Li	Please complete in typescript or in bold black capitals.			
2	Liquidator's name										
Full forename(s)	Richard										
Surname	Brewer										
3	Lic	Liquidator's address									
Building name/number	9t	9th Floor, 25 Farringdon Street									
Street											
Post town	London										
County/Region											
Postcode	EC4AAB										
Country											
4	Liquidator's email address or telephone number •						ıddr	ess	or telephone number 🍑	You must give an email address or	
Email address	telephone number. All infor							telephone number. All informatio on this form will appear on the			
Telephone number	02	238	0 (	546	464					public record.	
5	ln	sol	V	ency	/ pra	ctiti	onei	nu	mber		
Number	(	•	0	3	8						
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6	Liquidator's name <sup>©</sup>	<u> </u>			
Full forename(s)		Other Liquidator's details Use this section to tell us about			
Surname		another liquidator.			
7	Liquidator's address ®				
Building name/number		Other Liquidator's details			
Street	<del>-</del> ,	<ul> <li>Use this section to tell us about another liquidator. Use the</li> <li>continuation page to tell us about more than two liquidators.</li> </ul>			
Post town					
County/Region					
Postcode					
Country					
8	Liquidator's email address or telephone number 9	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				
	I confirm the appointment of the liquidator(s) on				
Date	$\begin{bmatrix} d & 2 & d & 1 & & & & & & & & & & & & & & & &$				
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	×			
Signature date	d 0 d 8 m 0 m 3 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	Alexander Kinninmonth					
Company name	RSM Restructuring Advisory LLP					
Address	Highfield Court					
Post town	Eastleigh					
County/Region						
Postcode	S O 5 3 3 T Y					
Country						
DX						
Telephone	02380 646 464					

#### ✓ 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.

#### f 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		
	<u> </u>	
Company name in full		
2	Liquidator's name	
Full forename(s)		
Surname		
3	Liquidator's address	<del></del>
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
4	Liquidator's email address or telephone number	1
Email address	- Inducator 5 cmail ductions of telephone insurance	You must give an email address or
Telephone number		telephone number. All information on this form will appear on the public record.
5	Insolvency practitioner number	positive
Insolvency practitioner		
number		}
		1