In accordance with section 109 of the Insolvency Act 1986

## 600



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

TUESDAY



A27 2

23/05/2023 #17 COMPANIES HOUSE

1	Company details		
Company number	0 8 3 6 7 6 6 7	→ Filling in this form  Please complete in typescript or in	
Company name in full	City Oils Ltd	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Andrew		
Surname	Watling		
3	Liquidator's address		
Building name/number	Office D		
Street	Beresford House		
Post town	Town Quay		
County/Region	Southampton		
Postcode	S O 1 4 2 A Q		
Country			
4	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	02380336464	public record.	
5	Insolvency practitioner number		
Number	1 5 9 1 0		

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6	Liquidator's name <sup>0</sup>	
Full forename(s)	Simon	Other Liquidator's details Use this section to tell us about
Surname	Campbell	another liquidator.
7	Liquidator's address @	<u> </u>
Building name/number	Office D	Other Liquidator's details Use this section to tell us about another liquidator. Use the
Street	Beresford House	
		continuation page to tell us about more than two liquidators.
Post town	Town Quay	
County/Region	Southampton	
Postcode	S O 1 4 2 A Q	
Country		
8	Liquidator's email address or telephone number <sup>©</sup>	You must give an email address or
Email address		telephone number. All information on this form will appear on the
Telephone number	02380336464	public record.
9	Insolvency practitioner number	
Number	1 0 1 5 0	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	1 8 0 5 2 7 3	
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 Costum	
Signature date		
Signature date	2 2  0 5  2 0 2 3	
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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	Laura Stevens	
Company name	Quantuma Advisory Limited	
Address	Office D	
	Beresford House	
Post town	Town Quay	
County/Region	Southampton	
Postcode	S O 1 4 2 A Q	
Country		
DX	info@quantuma.com	
Теlерһопе	02380336464	

#### ✓ 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.

#### **7** 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