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

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	· · · · · · · · · · · · · · · · · · ·
Company number		→ Filling in this form
Company name in full		Please complete in typescript or in bold black capitals.
company name in tail	True Fusion Ltd	——————————————————————————————————————
2	Liquidator's name	
Full forename(s)	Robert	
Surname	Cundy	
3	Liquidator's address	
Building name/number	5/7 Ravensbourne Road	
Street		
Post town	Bromley	
County/Region	Kent	
Postcode	B R 1 1 H N	
Country		
4	Liquidator's email address or telephone number •	• You must give an email address or
Email address	rob.cundy@edgerecovery.com	telephone number. All information on this form will appear on the
Telephone number	+44 (0)20 8315 7430	public record.
5	Insolvency practitioner number	!`
Number	9 4 9 5	

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

6	Liqui	dato	or's n	ame	9	0													
Full forename(s)	-																• Other Liquida this section another liquid	to tell us about	
Surname	_													_					
7	Liqui	dato	or's a	ddre	ess	0)				-	•	_				<u>-</u>		_
Building name/number Street																	another liquid	n to tell us about	ut
Post town													_				more than two) liquidators.	
County/Region																			
Postcode							Ţ										1		
Country			ll.			.l.——	<u> </u>	1]		
8	Liqui	dato	or's e	mail	l ad	dres	s or	tel	eph	one	e n	um	ber	•	อิ				-
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Telephone number																	public record.	iii appear on the	
9	Insol	vend	cy pra	actit	ion	er nı	umb	er					_		_		<u> </u>		
Number																			
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12	Type of liquidation																
	1	Mem													1.20		
		Credi	itors														
	Tick to	o con	firm th	he liq	uida	tion t	type							1			
13	Sign	and	date	9													
Liquidator's signature	- 1															 	_
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Signature date	2	8] [0	3		2	0	2	4							
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Notice of appointment of liquidator in a members' or creditors' voluntary winding up

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.

Ro	bert	Cun	dy

Edge Recovery Limited

5/7 Ravensbourne Road

Bromley							
Kent	-						
Postcode	В	R	1	1	Н	N	

+44 (0)20 8315 7430

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

knaccondancewith section 109 of the Insolvency Act 1986.

600 - continuation page

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

1	Company details	
Company number	1 0 7 5 5 8 4 8	
Company name in full	True Fusion Ltd	
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 •	<u> </u>
Email address		1 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	
Insolvency practitioner number		
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