

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



Companies House


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

1	Company details									
Company number	1	1	3	6	3	0	3	6		
Company name in full	Harrow Midco Limited									→Filling in this form Please complete in typescript or in bold black capitals.
2	Liquidator's name									
Full forename(s)	Nicholas James									
Surname	Timpson									
3	Liquidator's address									
Building name/number	10									
Street	Fleet Place									
Post town	London									
County/Region										
Postcode	E	C	4	M		7	R	B		
Country	United Kingdom									
4	Liquidator's email address or telephone number ①									
Email address	Marion.Anderson@interpathadvisory.com									① You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	0203 307 4214									
5	Insolvency practitioner number									
Number	2	0	6	1	0					



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6	Liquidator's name ①									
Full forename(s)	Howard								① Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	Smith									
7	Liquidator's address ②									
Building name/number	10								② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
Street	Fleet Place									
Post town	London									
County/Region										
Post code	E	C	4	M		7	R	B		
Country	United Kingdom									
8	Liquidator's email address or telephone number ③									
Email address	Marion.Anderson@interpathadvisory.com								③ You must give an email address or telephone number. All information on this form will appear on the public record.	
Telephone number	0203 307 4214									
9	Insolvency practitioner number									
Number	9	3	4	1						
10	Statement of appointment									
	I confirm the appointment of the liquidator(s) on									
Date	2	0		0	9		2	0	2	3
11	Appointment details									
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors									
12	Type of liquidation									
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors									
13	Sign and date									
Liquidator's signature	Signature									

									
Signature date	2	2	0	9	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 Marion Anderson									
Company name Interpath Ltd									
Address									
130 St Vincent Street									
Post town Glasgow									
County/Region									
Postcode	G	2		5	H	F			
Country United Kingdom									
DX									
Telephone 0203 307 4214									
 Checklist									
We may return forms completed incorrectly or with information missing.									
Please make sure you have remembered the following:									
<input type="checkbox"/> The company name and number match the information held on the public Register.									
<input type="checkbox"/> You have attached the required documents.									
<input type="checkbox"/> You have signed 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.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk	
This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk	