

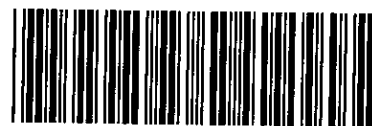
600

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



Companies House

SATURDAY

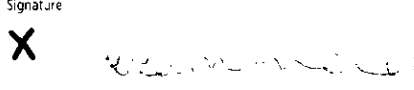


A17 *A83C0NSH* #183
13/04/2019
COMPANIES HOUSE

1	Company details	
Company number	1 1 4 2 1 5 5 2	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Jupiter Care Solutions Ltd	
2	Liquidator's name	
Full forename(s)	Kris Anthony	
Surname	Wigfield	
3	Liquidator's address	
Building name/number	3rd Floor	
Street	Westfield House	
Post town	60 Charter Row	
County/Region	Sheffield	
Postcode	S 1 3 F Z	
Country		
4	Liquidator's email address or telephone number ^①	
Email address	Kris.Wigfield@begbies-traynor.com	① You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	0114 2755033	
5	Insolvency practitioner number	
Number	2 2 6 7 2	

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6	Liquidator's name ^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Joanne Louise		
Surname	Hammond		
7	Liquidator's address ^②		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.
Building name/number	3rd Floor		
Street	Westfield House		
Post town	60 Charter Row		
County/Region	Sheffield		
Postcode	S 1 3 F Z		
Country			
8	Liquidator's email address or telephone number ^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address			
Telephone number	0114 2755033		
9	Insolvency practitioner number		
Number	1 7 0 3 0		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 1 1 m 0 4 y 2 0 y 1 9		
11	Appointment details		
	The appointment was made by (Tick one) <input type="checkbox"/> Company <input checked="" type="checkbox"/> Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature 		
Signature date	d 1 1 m 0 4 y 2 0 y 1 9		

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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 **Oliver Adams**

Company name **Begbies Traynor (SY) LLP**

Address **3rd Floor**

Westfield House

Post town **60 Charter Row**

Country/Region **Sheffield**

Postcode **S 1 3 F Z**

Country

DX

Telephone **0114 2755033**

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