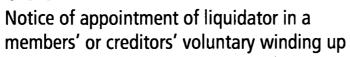


In accordance with section 109 of the Insolvency Act 1986

600





AAD4HPN5
A14 16/09/2021 #67
COMPANIES HOUSE

	_		
1	Company details		
Company number	1 2 1 2 9 9 6	Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	Prosperity St James House NMPI Ltd		
2	Liquidator's name		
Full forename(s)	Andrew		
Surname	Watling		
3	Liquidator's address		
Building name/number	Office D		
Street	Beresford House		
	19		
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 public record.	
Telephone number	02380336464		
5	Insolvency practitioner number	· V	
Number	1 5 9 1 0	•	

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

Liquidator's name ⁰	→ 1
Simon	Other Liquidator's details Use this section to tell us about
Campbell	another liquidator.
Liquidator's address 0	
Office D	Other Liquidator's details
Beresford House	Use this section to tell us about another liquidator. Use the
	continuation page to tell us about more than two liquidators.
Town Quay	
Southampton	
S O 1 4 2 A Q	
Liquidator's email address or telephone number ®	You must give an email address or
	telephone number. All information on this form will appear on the
02380336464	public record.
Insolvency practitioner number	
1 0 1 5 0	
Statement of appointment	
I confirm the appointment of the liquidator(s) on	
3 1 0 8 2 0 2 1	
Appointment details	
The appointment was made by	
☐ Creditors	
Type of liquidation	
Tick to confirm the liquidation type	
□ Members	
☑ Creditors	
Sign and date	
Signature	
X (, \dagger \tau \tau \tau \tau \tau \tau \tau \tau	X
John State of the	
1 5 0 9 72 70 72 71	
	Campbell Liquidator's address Office D Beresford House Town Quay Southampton S O 1 4 2 A Q Liquidator's email address or telephone number 02380336464 Insolvency practitioner number 1 0 1 5 0 Statement of appointment I confirm the appointment of the liquidator(s) on 3 1 0 8 2 0 2 1 Appointment details The appointment was made by (Tick one) Company Creditors Type of liquidation Tick to confirm the liquidation type Members Creditors Sign and date Signature X

600

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.

Contact name	Neil Allen	
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	
Telephone	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.

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