

Form No. VL1

**Notice of appointment of Liquidator
Voluntary winding up
(Members or Creditors)**

VL1

Please do not
write in this
margin. Please
complete
legibly,
preferably in
black type, or
bold, block
lettering.

Pursuant to Article 95 of the Insolvency (Northern Ireland) Order 1989

To the Registrar of Companies**For official use****Company number**

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NI051021

* insert full
name of
company

Name of company

Citizens Advice Mid Ulster

Nature of business

Information Services

I give notice that I have been appointed liquidator of the above company on 20 August 2019

+ delete as
appropriate

The appointment by the [the company] ~~[the creditors]~~ +
Type of liquidation [Members] ~~[Creditors]~~ +

Name of Liquidator	Alison Burnside		
Office holder number	GBNI 85		
Address	1-3 Arthur Street,		
	Belfast		
	BT1 4GA		
Signature	<i>ABurnside</i>	Date	20 August 2019

Name of Liquidator	
Office holder number	
Address	
Signature	Date

Presentor's name, address and reference (if any):

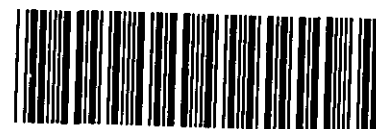
Time critical reference

After signing please return the form to The Registrar of
Companies for Northern Ireland

For official use

Publ

MONDAY



JNI

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02/09/2019
COMPANIES HOUSE

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