In accordance with section 109 of the Insolvency Act 1986

Post town

Postcode

County/Region

## 600



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

TUESDAY



10/07/2018 COMPANIES HOUSE e refer to

3

Company details → Filling in this form Company number 1 3 0 2 0 Please complete in typescript or in bold black capitals. Company name in full Miller Holdings Limited 2 Liquidator's name Full forename(s) Karen Surname Spears 3 Liquidator's address Building name/number 9th Floor, 25 Farringdon Street Street

Country					
4	Liquidator's email address or telephone number •	• You must give an email address or			
Email address	restructuring.london.core@rsmuk.com	telephone number. All information on this form will appear on the			
Telephone number	0203 201 8000	public record.			

5	Insc	olve	ncy	prac	titic	oner	nun	nber
Number	8	8	5	4				

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4 A B

London

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

6	Liquidator's name <sup>0</sup>				
Full forename(s)	Matthew Robert	Other Liquidator's details Use this section to tell us about			
Surname	Haw	another liquidator.			
7	Liquidator's address o				
Building name/number Street	9th Floor, 25 Farringdon Street	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.			
Post town	London				
County/Region					
Postcode	E C 4 A 4 A B				
Country					
8	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			
Email address	restructuring.london.core@rsmuk.com				
Telephone number	0203 201 8000	public record.			
9	Insolvency practitioner number				
Number	9 6 2 7				
10	Statement of appointment				
	I confirm the appointment of the liquidator(s) on				
Date	$\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 $				
11	Appointment details				
	The appointment was made by (Tick one)  ☑ Company □ Creditors				
12	Type of liquidation				
	Tick to confirm the liquidation type  ☑ Members □ Creditors				
13	Sign and date				
Liquidator's signature	Signature X	×			
Signature date	d 0 6 7 7 2 0 1 8				