In accordance Section 109 of Insolvency Act 1986.  $^{\text{with}}_{\text{the}}600$ 



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

\*A/FS2KJE\* A09 03/10/2018 COMPANIES HOUSE

#200

1	Cor	mpa	ny d	etail	s			-		
Company number	0	2	4	6	6	3	8	4		→ Filling in this form  Please complete in typescript
Company name in full	BG "	Thaila	ind Li	mited				or in bold black capitals.		
2	Liq	uida	tor's	nar	ne					
Full forename(s)	Nicholas James									
Surname	Timpson									
3	Liq	uida	tor's	ado	dres	s				
Building name/number	15									
Street	Canada Square									
Post town	Long	London								
County/Region										
Postcode	E	1	4		5	G	L			
Country	United Kingdom									
4	Liq	uida	tor's	s em	ail a	ddre	ess (	or te	elephone numb	er O
Email address									You must give an email address or telephone number. All	
Telephone number										information on this form will appear on the public record.
5	Insc	olve	псу	prac	titio	ner	num	ıber		
Number	2	0	6	1	0					
								.4		

		ce of	appoi windi			iquida	ator in	men	nbers'	or cr	editors'		
6			or's										
Full forename(s)	Mark Jeremy									Other Liquidator's details     Use this section to tell us about another liquidator.			
Surname	Orton												
7	Liqu	uidat	or's	addı	ess	0						· · · · · · · · · · · · · · · · · · ·	
Building name/number	15										Other Liquidator's details Use this section to tell us about another liquidator. Use the		
Street	Canada Square continuation page to tell us about more than two liquidators.												
Post town	London									_			
County/Region													
Post code	E	E 1 4 5 G L											
Country	Unite	United Kingdom											
8	Liqu	ıidat	or's	ema	il add	dress	s or t	elep	hone	nur	nber 🛭	-	
Email address											●You must give an email address or telephone number. All information		
Telephone number		telephone number. All information on this forma will appear on the public record.											
9	Insc	Insolvency practitioner number											
Number	8	8	4	6									
10	Stat	Statement of appointment											
	I confirm the appointment of the liquidator(s) on												
Date	1	9		0	9		2	0	1	9			
11	App	Appointment details											
	(Tick ☑ C	one) ompa	ny	was i	made	by							
	_	redito							•				
12	г—	Type of liquidation											
				ie liqu	idation	n type	<i>!</i>						
		lembe											
	□ c	redito	rs								···		
13	Sigr	1 and	d dat	e								···	
Liquidator's signature	Signatur	9											
	×			4	5	- - ·- 1			1		<b>;</b>	c	
Signature date	2	6		0	9		2	0	1	8			

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☐ Presenter information ☐	Important 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.	public record.				
Contact name Ferwah Shaheen	⊠ Where to send				
Company name KPMG LLP	You may return this form to any Companies House address, however for expediency we				
Address	advise you to return it to the address below: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.				
15 Canada Square					
Post town London	_				
County/Region	-				
Postcode E 1 4 5 G L	<i>i</i> Further information				
Country United Kingdom	For further information, please see the guidance note on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk				
DX					
Telephone	email enquines@companiesnessesgov.an				
	This form is available in an				
✓ Checklist	alternative format. Please visit the forms page on the website at				
We may return forms completed incorrectly or with information missing.					
Please make sure you have remembered the following:	www.companieshouse.gov.uk				
☐ The company name and number match the information held on the public Register.					
☐ You have attached the required documents.					
☐ You have signed the form.					