In accordance with section 109 of the Insolvency Act 1986

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Companies House

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

20/09/2018 COMPANIES HOUSE

	Company details	A Filling in this form
Company number	03290318	→ Filling in this form Please complete in typescript or in
Company name in fu	11 B.M.J. (MANUFACTURING) LIMITED	bold black capitals.
2	Liquidator's name	
Full forename(s)	RICHARD FRANK	
Surname	SIMMS	
3	Liquidator's address	
Building name/numb	er % FASIMMS & PARTNERS LAD	
Street	ALMA PARK, WOODWAY LANE	
	CUAYBROOKE PARIA	
Post town	LUTTERWORTH	
County/Region	LEICESTERSHIRE	
Postcode	LET75FB	
Country	VK	
4	Liquidator's email address or telephone number •	• You must give an email address of
Email address	RSIMMS@FASMMS. COM	telephone number. All informatio on this form will appear on the public record.
Telephone number	01455 555 444	
5	Insolvency practitioner number	
Number	9252	

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6	Liquidator's name [©]		
Full forename(s)	MARTIN RICHARD	Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	BUTTKISS		
7	Liquidator's address @		
Building name/number	10 FASIMMS & PARTINORS CITO	Other Liquidator's details	
Street	ALMA PARK, WOOD WAY LANE	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
	CLAMBROOKE FARMA		
Post town	LUTTERWORTH		
County/Region	LEICESTERSHIRE		
Postcode	LEI 75FB		
Country	UK		
8	Liquidator's email address or telephone number You must give an email address or telephone number		
Email address	MBUTTRISS CRASIMMS. COM	telephone number. All information on this form will appear on the	
Telephone number	01455 555 444	public record.	
9	Insolvency practitioner number	·	
Number	9291		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	11/3 5 4 2618		
11	Appointment details		
	The appointment was made by		
	(Tick one) APPOINTMENT UNCEL Company PACAGRAPH 83 OF SCHOOLE		
	□ Creditors B		
12	Type of liquidation		
	Tick to confirm the liquidation type		
	□ Members		
	Creditors		
13	Sign and date	<u>. </u>	
 Liquidator's signature	Signature		
	X		
Signature date	1 9 0 9 26/18		

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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	Charlene Maycock	
Company name	F. A. Simms & Partners Limited	
	Alma Park	
	Woodway Lane	
Address	Claybrooke Parva	
	Lutterworth	
	Leicestershire	
	LE17 5FB	
	Tel: 01455 555 444	
Post town		
County/Region		
Postcode	LEVASEB	
Country		
DX		
Telephone	744 ZZZ ZZYK	

✓ 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