

G

CHWP000

Please do not write
in this
margin

Please complete
legibly, preferably in
black type, or bold
block lettering
* insert full name of
company

+ delete as
appropriate

Presenter's name,
address and
reference (if any)

FORM NO. 600
Notice of appointment of liquidator
Voluntary winding up
Members

600

Pursuant to section 109 of the Insolvency Act 1986


To Registrar of Companies	For official use	Company number			
	<table border="1"><tr><td></td><td></td><td></td></tr></table>				04120282

Name of company
Inflexion Managers Limited

Nature of Business
Non-trading company

I give notice that I have been appointed liquidator of the above company
on 22 March 2010

The appointment was by the company
Type of liquidation members' voluntary

Name of Liquidator	Samantha Keen
Office holder number	9250
Address	Grant Thornton UK LLP, No 1 Dorset Street, Southampton, Hampshire, SO15 2DP
Signature	 Date 22 March 2010

Name of Liquidator	
Office holder number	
Address	
Signature	Date

Grant Thornton UK LLP
No 1 Dorset Street
Southampton
Hampshire SO15 2DP

Time critical reference

For official use (02/00)	
General section	Post room

WEDNESDAY



A14 24/03/2010 288
COMPANIES HOUSE