

# G

CHWP000

Please do not write  
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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><tr><td></td><td></td><td></td></tr></table>				<table><tr><td>04120282</td></tr></table>	04120282
04120282						

Name of company  

Inflexion Managers Limited
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Nature of Business

Company in liquidation

I give notice that I have been appointed Liquidator of the above company  
on 27 October 2010

The appointment was by Court Order dated 27 October 2010

Name of Liquidator	Sean Croston
Office holder number	8930
Address	Grant Thornton UK LLP, No 1 Dorset Street, Southampton, Hampshire, SO15 2DP
Signature	<i>SC</i> Date 1 November 2010

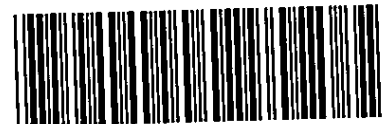
Name of Liquidator	
Office holder number	
Address	
Signature	Date

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

Time critical reference

For official use (02/00)  
General section

SATURDAY



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COMPANIES HOUSE