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



COMPANIES HOUSE

1	Company details		
Company number	0 4 4 0 4 5 6 1	→ Filling in this form Please complete in typescript or in	
Company name in full	MITIE DORMANT (NO.2) LIMITED	bold black capitals.	
2	Liquidator's name		
Full forename(s)	EMMA		
Surname	CRAY	•	
3	Liquidator's address		
Building name/number	PRICEWATERHOUSECOOPERS LLP		
Street	ONE CHAMBERLAIN SQUARE		
Post town	BIRMINGHAM		
County/Region			
Postcode	B 3 3 A X		
Country	UNITED KINGDOM		
4	iquidator's email address or telephone number • O You must give an email address		
Email address	emma.cray@pwc.com	telephone number. All information on this form will appear on the public record.	
Telephone number			
5	Insolvency practitioner number		
Number	1 7 4 5 0	•	
		·	

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6	Liquidator's name ⁰		
Full forename(s)	CAROLINE	Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	RIFKIND		
7	Liquidator's address ®		
Building name/number	PRICEWATERHOUSECOOPERS LLP	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.	
Street	7 MORE LONDON RIVERSIDE		
Post town	LONDON		
County/Region			
Postcode	SE12RT		
Country	UNITED KINGDOM		
8	Liquidator's email address or telephone number ®	You must give an email address or	
Email address	caroline.rifkind:pwc.com	telephone number. All information on this form will appear on the public record.	
Telephone number			
9	Insolvency practitioner number		
Number	2 2 5 9 0	• .	
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	$\begin{bmatrix} a \\ 3 \end{bmatrix} \begin{bmatrix} a \\ 0 \end{bmatrix} \begin{bmatrix} a \\ 0 \end{bmatrix} \begin{bmatrix} a \\ 3 \end{bmatrix} \begin{bmatrix} a \\ 3 \end{bmatrix} \begin{bmatrix} a \\ 2 \end{bmatrix} \begin{bmatrix} a \\ 3 \end{bmatrix} \begin{bmatrix} a $		
11	Appointment details		
	The appointment was made by (Tick one) ☐ Company ☐ Creditors	,	
12	Type of liquidation	<u></u>	
•	Tick to confirm the liquidation type ☐ Members ☐ Creditors		
13	Sign and date		
Liquidator's signature	Signature X		
Signature date	d 0 d 5 m 0 m 4 y 2 y 0 y 2 y 3		

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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	SERENA HERIAN	:
Company name	PRICEWATERHOUSECOOPER	₹\$
LLP		
Address .	ONE CHAMBERLAIN SQUARE	
·	•	
Post town	BIRMINGHAM	
County/Region	· · · · · · · · · · · · · · · · · · ·	
Postcode .	B 3 3 A X	
Country	UNITED KINGDOM	٠٠.
DX		
Telephone		

✓ 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