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



Companies House

THURSDAY



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01/07/2021

#218

COMPANIES HOUSE

**1** Company details

Company number 0 5 2 9 5 6 5 2

Company name in full Amcrest Limited

→ Filling in this form  
Please complete in typescript or in  
bold black capitals.

**2** Liquidator's name

Full forename(s) Stephen Paul

Surname Grant

**3** Liquidator's address

Building name/number 2nd Floor, Regis House

Street 45 King William Street

Post town London

County/Region

Postcode E C 4 R 9 A N

Country

**4** Liquidator's email address or telephone number <sup>①</sup>

Email address

Telephone number 020 7403 1877

① You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

**5** Insolvency practitioner number

Number 8 9 2 9

600

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## 6 Liquidator's name<sup>①</sup>

Full forename(s) \_\_\_\_\_  
Surname \_\_\_\_\_

**① Other Liquidator's details**  
Use this section to tell us about another liquidator.

## 7 Liquidator's address<sup>②</sup>

Building name/number \_\_\_\_\_  
Street \_\_\_\_\_  
Post town \_\_\_\_\_  
County/Region \_\_\_\_\_  
Postcode \_\_\_\_\_  
Country \_\_\_\_\_

**② 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.

## 8 Liquidator's email address or telephone number<sup>③</sup>

Email address \_\_\_\_\_  
Telephone number \_\_\_\_\_

**③ You must give an email address or telephone number. All information on this form will appear on the public record.**

## 9 Insolvency practitioner number

Number \_\_\_\_\_

## 10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date <sup>d</sup>2 <sup>d</sup>3 <sup>m</sup>0 <sup>m</sup>6 <sup>y</sup>2 <sup>y</sup>0 <sup>y</sup>2 <sup>y</sup>1

## 11 Appointment details

The appointment was made by  
(Tick one)

- ☐ Company  
☐ Creditors

**Court Order**

## 12 Type of liquidation

Tick to confirm the liquidation type

- ☒ Members  
☐ Creditors

## 13 Sign and date

Liquidator's signature Signature  
 X

Signature date <sup>d</sup>2 <sup>d</sup>3 <sup>m</sup>0 <sup>m</sup>6 <sup>y</sup>2 <sup>y</sup>0 <sup>y</sup>2 <sup>y</sup>1

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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 **Emma O'Bryan**

Company name **Azets Holdings Limited**

Address **2nd Floor Regis House**

**45 King William Street**

Post town **London**

County/Region

Postcode **E C 4 R 9 A N**

Country

DX

Telephone **020 7403 1877**

**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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)