

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



01/04/2021 **COMPANIES HOUSE** Company details Company number 8 > Filling in this form Please complete in typescript or in Company name in full **Bloomfield Foods Limited** bold black capitals. Liquidator's name Full forename(s) **Edward Robert Bines** Surname Liquidator's address Building name/number The Shard Street 32 London Bridge Street Post town London County/Region **Postcode** S Ε 1 S G UK Country Liquidator's email address or telephone number • **●**You must give an email address or telephone number. All information Email address maddy.skerrett@kroll.com on this form will appear on the public record. Telephone number 020 7089 4700 Insolvency practitioner number Number 4 7 3 0

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6	Liquidator's name	
	Liquidator's name <sup>®</sup>	So Oak on Linvidat and a details
Full forename(s)	Paul David	Other Liquidator's details Use this section to tell us about
Surname	Williams	another liquidator.
7	Liquidator's address€	
Building name/number	The Shard	Other Liquidator's details
Street	32 London Bridge Street	Use this section to tell us about another liquidator. Use the
		continuation page to tell us about more than two liquidators.
Post town	London	
County/Region		
Postcode	S E 1 9 S G	
Country	UK	
8	Liquidator's email address or telephone number●	You must give an email address or
Email address	maddy.skerrett@kroll.com	telephone number. All information on this form will appear on the
Telephone number	020 7089 4700	public record.
9	Insolvency practitioner number	
Number	9 2 9 4	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	<sup>d</sup> 2   <sup>d</sup> 5   <sup>m</sup> 0   <sup>m</sup> 3   <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	
12	Type of liquidation	<u> </u>
1.2		
	Tick to confirm the liquidation type  Members	
	□ Creditors	
	L Creditors	_
1	Sign and date	
Liquidator's signature	Signature .	
	X	
Signature date	d 3 d 0 m 3 y 2 y 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 Maddy Skerrett Company name Duff & Phelps Ltd. The Shard 32 London Bridge Street London County/Region Postcode S Ε S G Country UK DX 020 7089 4700 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.

## 1 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