In accordance with section 109 of the Insolvency Act 1986

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

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details		
Company number	0 5 6 6 6 1 0 6	→ Filling in this form Please complete in typescript or in	
Company name in full		bold black capitals.	
2	Liquidator's name		
Full forename(s)	Sarah		
Surname	O'Toole		
3	Liquidator's address		
Building name/number	4 Hardman Square		
Street	Spinningfields		
Post town	Manchester		
County/Region			
Postcode	M 3 3 E B		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or	
Email address		telephone number. All information on this form will appear on the public record.	
Telephone number	0161 953 6900		
5	Insolvency practitioner number		
Number	1 4 5 5 4		

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6	Liquidator's name ⁰		
Full forename(s)	Jason	Other Liquidator's details Use this section to tell us about	
Surname	Bell	another liquidator.	
7	Liquidator's address ®		
Building name/number	4 Hardman Square	Other Liquidator's details	
Street	Spinningfields	Use this section to tell us about another liquidator, Use the continuation page to tell us about more than two liquidators.	
Post town	Manchester		
County/Region			
Postcode	M 3 B B		
Country			
8	Liquidator's email address or telephone number Output Description:	You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number	0161 953 6900	public record.	
9	Insolvency practitioner number		
Number	1 7 9 1 2		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	$\begin{bmatrix} 1 & 1 & 1 & 1 \\ 2 & 3 & 1 & 9 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 9 & 1 & 2 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 9 & 1 & 2 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 9 & 1 & 2 \end{bmatrix}$		
11	Appointment details		
	The appointment was made by (Tick one) ☑ Company □ Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type ☐ Members ☑ Creditors		
13	Sign and date		
Liquidator's signature	X Signature	X	
 Signature date	$\begin{bmatrix} d & & & & \\ 2 & 8 & & & \\ & & & 0 & 9 \end{bmatrix} \begin{bmatrix} y & y & y & y \\ 2 & 0 & 2 & 0 \end{bmatrix}$		

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

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 Company name Grant Thornton UK LLP Address 4 Hardman Square Spinningfields Post town Manchester County/Region Postcode Μ 3 3 Ε В Country DX Telephone 0161 953 6900

✓ 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.
- \square 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