Manchester, M20 5PG
Time Critical Reference



CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering *Insert full name of company Notice of appointment of liquidator Voluntary winding up (Members or Creditors) 600

Pursuant to section 109 of the Insolvency Ac	t 1986	
To the Registrar of Companies (Address Overleaf)	For official use	Company number
Name of Company		
* 63 Degrees Limited		
Nature of Business		
Licensed restaurant		
I give notice that I have been appointed liquid	dator of the above company o	n 14 March 2017
The appointment was by Members and Cree	ditors	
Type of liquidation Creditors		
Name of Liquidator Claire L Dwyer Office holder number 9329 Address 4 The Stables Wilmslow Road Didsbury Manshester, M20 5F	PG	
Signature C) (C)	Date	4 March 2017
Name of Liquidator Office holder number Address		·
Signature	Date	
	<u></u> . <u></u> .	
• • • • • • • • • • • • • • • • • • • •	fficial Use ral Section	Post room

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COMPANIES HOUSE