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## **COMPANIES FORM No 600**

Notice of appointment of liquidator Voluntary winding up (Members or Creditors) 600

Please do not write in this margin

Pursuant to Section 109 of the Insolvency Act 1986

To the Registrar of Companies

For official use

Company number 08104544

Insert full name of company

Name of Company
Mass Medical Solutions Limited

Nature of Business

I give notice that I have been appointed liquidator of the above company on 25 August 2015

The appointment was by Members & Creditors

Type of liquidation Members & Creditors

Name of Liquidator	Michael Chamberlain	
Office holder number	8735	
Address	Resolution House, 12 Mill Hill, Leeds, LS1 5DQ	
Signature	Chambel	Date 25 August 2015

Name of Liquidator	
Office holder number	
Address	
_	
Signature	Date

Presenter's name, address and reference (if any):

M Chamberlain Resolution House, 12 Mill Hill Leeds LS1 5DQ

Time critical reference

For Official Use

General Section

Post Room

01/09/2015 COMPANIES HOUSE #353