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

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	A15	08/12/2022 #140	
1	Company details	COMPANIES HOUSE	
Company number	0 9 1 8 4 4 2 7	Filling in this form  Please complete in typescript or in bold black capitals.	
Company name in full	Costello's (Malton) Ltd		
2	Liquidator's name	<u> </u>	
Full forename(s)	Gareth		
Surname	James Lewis		
3	Liquidator's address		
Building name/number	Suite E10		
Street	Joseph's Well		
Post town	Westgate		
County/Region	Leeds		
Postcode	LS3 1 A B		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or telephone number. All information on this form will appear on the public record.	
Email address	gareth@lewisbri.co.uk		
Telephone number	0113 2459444		
5	Insolvency practitioner number	· · · · · · · · · · · · · · · · · · ·	
Number	1 4 9 9 2		

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6	Liquidator's name <sup>©</sup>	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address <sup>©</sup>	
Building name/numb	per .	Other Liquidator's details
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town		
County/Region		<del></del>
Postcode		
Country		
8	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
Telephone number	·	public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{bmatrix} d \\ 3 \end{bmatrix} \begin{bmatrix} d \\ 0 \end{bmatrix} \begin{bmatrix} m \\ 1 \end{bmatrix} \begin{bmatrix} m \\ 1 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 0 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix}$	
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	Signature X C	×
Signature date	1°0 °2   "1   "2   '2   '0   '2   '7	

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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 Liam Ryde			
Company name Lewis Business Recovery & Insolvency			
Address Suite E10			
Joseph's Well			
Post town Westgate			
County/Region Leeds			
Postcode L S 3 1 A B			
Country			
DX			
Telephone			

## 1

#### Checklist

0113 2459444

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 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