In accordance with section 109 of the Insolvency Act 1986

600

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



SATURDAY



A82U52MW A19 06/04/2019 #3 COMPANIES HOUSE

| 1 | Company details | |
|----------------------|--|---|
| Company number | 1 0 2 7 7 4 4 8 | → Filling in this form Please complete in typescript or in |
| Company name in full | Darren Hopkins Limited | bold black capitals. |
| | | |
| 2 | Liquidator's name | |
| Full forename(s) | Philip Alexander | |
| Surname | Beck | |
| 3 | Liquidator's address | |
| Building name/number | SJD Insolvency Services Ltd | |
| Street | KD Tower | |
| | Cotterells | |
| Post town | Hemel Hempstead | |
| County/Region | | |
| Postcode | H P 1 1 F W | |
| Country | | |
| 4 | Liquidator's email address or telephone number O You must give an email ad | |
| Email address | philip.beck@sjdaccountancy.com | telephone number. All information on this form will appear on the |
| Telephone number | | public record. |
| 5 | Insolvency practitioner number | |
| Number | 8 7 2 0 | |
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Notice of appointment of liquidator in a members' or creditors' voluntary winding up

| Building name/number Street Post town County/Region Postcode | ntor's address [©] | Other Liquidator's details Use this section to tell us about another liquidator. Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about |
|--|--|---|
| 7 Liquida Building name/number Street Post town County/Region Postcode | ator's address ❷ | another liquidator. Other Liquidator's details Use this section to tell us about another liquidator. Use the |
| Post town County/Region Postcode | otor's address [©] | Use this section to tell us about another liquidator. Use the |
| dost town County/Region dostcode | | Use this section to tell us about another liquidator. Use the |
| Post town County/Region Postcode | | another liquidator. Use the |
| County/Region | | more than two liquidators. |
| ostcode | | • |
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| Country | | _ |
| Liquida | tor's email address or telephone number ® | You must give an email address o |
| mail address | · | telephone number. All information on this form will appear on the |
| elephone number | | public record. |
| Insolve | ency practitioner number | |
| lumber | | |
| 0 Statem | ent of appointment | |
| | the appointment of the liquidator(s) on | |
| Date d d d d d d d d d d d | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | |
| 1 Appoin | tment details | |
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| ☑ Me | onfirm the liquidation type ombers editors | |
| Sign ar | d date | |
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