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COMPANIES FORM No. 600 Notice of appointment of

liquidator

Voluntary winding up (Members or creditors)

Please do not write in this margin

Pursuant to section 109 of the Insolvency Act 1986

Please complete legibly, preferably in black type, or bold block lettering

Please complete To the Registrar of Companies

For official use Company number 02131566

Name of company

*Insert full name of company

A & GP (GROUP) LIMITED	

Nature of business

Holding company

IAWe give notice that IAwe have been appointed liquidator(s) of the above company on 21 July 2017

The appointment was by [the company] {the creditors}*

*Delete as applicable

Type of liquidation [members] [creditors]*

Name of liquidator	Michael Rose		
Office holder number	8928		
Address	M1 Insolvency, Cumberland House, 35 Park Row, Nottingham, Notts NG1 6EE		
Signature Mase	Date 21 July 2017		

Name of liquidator		
Office holder number		
Address		
Signature	Date	

Presenter's name address and reference (if any)
MR\SAGP01
M1 Insolvency
Cumberland House 35 Park Row

Nottingham NG1 6EE

Time critical reference

For Official Use
Liquidation Section | Post Room



A10 28/07/2017 COMPANIES HOUSE

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