In accordance with section 109 of the Insolvency Act 1986

## 600



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

13/03/2018 COMPANIES HOUSE

1	Company details	
Company number	0 2 7 0 7 9 8 1	→ Filling in this form
Company name in full	ARWP (Exeter) Limited	Please complete in typescript or in bold black capitals.
2	Liquidator's name	
Full forename(s)	Sean K	
Surname	Croston	
3	Liquidator's address	
Building name/number	1020	
Street	Eskdale Road	
Post town	Winnersh	
County/Region	Wokingham	_
Postcode	R G 4 1 5 T S	
Country		
4	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	023 8038 1147	public record.
5	Insolvency practitioner number	
Number	8 9 3 0	

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

Full forename(s)  Surname  7 Lic Building name/number  Street  Post town  County/Region  Postcode  Country	quidator'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 more than two liquidators.
Building name/number  Street  Post town  County/Region  Postcode	quidator's address <b>0</b>	another liquidator.  Other Liquidator's details Use this section to tell us about another liquidator, Use the continuation page to tell us about
Building name/number  Street  Post town  County/Region  Postcode	quidator's address •	<ul> <li>Use this section to tell us about another liquidator, Use the continuation page to tell us about</li> </ul>
Post town County/Region Postcode		<ul> <li>Use this section to tell us about another liquidator, Use the continuation page to tell us about</li> </ul>
Post town County/Region Postcode		another liquidator, Use the continuation page to tell us about
County/Region Postcode		-
Postcode		-
Country		
The second secon		-
8 Liq	quidator'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 In	solvency practitioner number	
Number		
10 St	atement of appointment	
Ιc	confirm the appointment of the liquidator(s) on	
Date d <sub>0</sub>	d	
11 Ap	ppointment details	
12 Ty	pe of liquidation	
<b>E</b>	ck to confirm the liquidation type  Members Creditors	
13 Sig	gn and date	
Liquidator's signature	X X	
Signature date d 0	0 d 8	