In accordance with section 109 of the Insolvency Act 1986

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# Companies House

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

15/07/2020 **COMPANIES HOUSE** 

1	Company details	
Company number	0 3 0 1 7 7 8 4	→ Filling in this form Please complete in typescript or in
Company name in full		bold black capitals.
2	Liquidator's name	
Full forename(s)	Simon Renshaw ACA MIPA	
Surname	MABRP	
3	Liquidator's address	
Building name/number	Langley House	
Street	Park Road	
Post town	London	
County/Region		
Postcode	N 2 8 E Y	
Country		
4	Liquidator's email address or telephone number •	
Email address	info@aabrs.com	telephone number. All information on this form will appear on the public record.
Telephone number	020 8444 2000	
5	Insolvency practitioner number	
Number	9712	

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6	Liquidator's name <sup>0</sup>	•	
Full forename(s)		Other Liquidator's details Use this section to tell us about another liquidator.	
Surname			
7	Liquidator's address o		
Building name/number		Other Liquidator's details Use this section to tell us about another liquidator. Use the	
Street			
		continuation page to tell us about more than two liquidators.	
Post town			
County/Region			
Postcode			
Country			
8	Liquidator's email address or telephone number <sup>©</sup>	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	1 0 0 7 2 0 2 0		
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	· · · · · · · · · · · · · · · · · · ·	
iquidator's signature	Signature	•	
3	× X X		
	- Charles		
ignature date	$\begin{bmatrix} d & 1 & d & 0 & \begin{bmatrix} m & m & 7 & 1 & 2 & 7 & 7 & 7 & 7 & 7 & 7 & 7 & 7 & 7$		

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## **Presenter information**

Checklist

following:

with information missing.

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.

### Important information

All information on this form will appear on the public record.

You may return this form to any Companies House address, however for expediency we advise you to

The Registrar of Companies, Companies House,

Contact name	Simon Renshaw ACA MIPA MAB	Where to send	
Company name	AABRS Limited	You may return this fo	
		address, however for return it to the addres	
Address	Langley House	The Registrar of Compai Crown Way, Cardiff, Wal DX 33050 Cardiff	
	Park Road		
	,	DA 33030 Cardin.	
Post town	London		
County/Region			
Postcode	N 2 8 E Y	<i>i</i> Further inform	
Country		For further information	
DX		on the website at www. or email enquiries@com	
Telephone	020 8444 2000		
		ا ما د	

We may return forms completed incorrectly or

Please make sure you have remembered the

The company name and number match the information held on the public Register. You have signed and dated the form.

# 7 Further information

return it to the address below:

Crown Way, Cardiff, Wales, CF14 3UZ.

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