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

TUESDAY



A03

#283

		COMPANIES HOUSE	
1	Company details		
Company number	0 3 8 0 0 2 0 8	→ Filling in this form Please complete in typescript or in	
Company name in full	Zincox Resources Limited	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Steven		
Surname	Edwards		
3	Liquidator's address		
Building name/number	4 Mount Ephraim Road		
Street	Tunbridge Wells		
Post town	Kent		
County/Region			
Postcode	TN11EE		
Country			
4	Liquidator's email address or telephone number • • • • • • • • • • • • • • • • • • •		
Email address		telephone number. All information on this form will appear on the	
Telephone number	01892 700200	public record.	
5	Insolvency practitioner number		
Number	2 6 0 9 0		

600

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6	Liquidator's name ¹⁰	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address ®	<u> </u>
Building name/number		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		
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	··· <u>·</u>
	I confirm the appointment of the liquidator(s) on	
Date	2 9 7 2 7 1	
11	Appointment details	<u></u>
	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	×
Signature date	$\begin{bmatrix} 1 \\ 0 \end{bmatrix} \begin{bmatrix} 4 \\ 0 \end{bmatrix} \begin{bmatrix} 7 \\ 8 \end{bmatrix} \begin{bmatrix} 7 \\ 2 \end{bmatrix} \begin{bmatrix} 7 \\ 0 \end{bmatrix} \begin{bmatrix} 7 \\ 2 \end{bmatrix} \begin{bmatrix} 7 \\ 1 \end{bmatrix}$	

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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	Joe Longhurst	
Company name	Crowe U.K. LLP	
Address	4 Mount Ephraim Road	
	Tunbridge Wells	
Post town	Kent	
County/Region		
Postcode	T N 1 TEE	
Country		
DX		
Telephone	01892 700200	

Checklist

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