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CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering *Insert full name of company **FORM No. 600**

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

COMPANIES HOUSE

Pursuant to section 109 of the Insolvency Act 198	36	
To the Registrar of Companies (Address Overleaf)	For official use	Company number
(Address Overleal)		04083899
Name of Company		<u>.</u>
* All Areas Security Limited		
Nature of Business		
Security		
I /We give notice that I /We have been appointed I 2011	iquidator(🖋) of the above com	pany on 21 st September
The appointment was by Creditors		
Type of liquidation Creditors		
Name of Liquidator Office holder number Address Address Clive Morris 8820 Heskin Hall Farm Wood Lane Heskin Preston		
Signature	Date 2	11-09-1.
Name of Liquidator Office holder number Address		
Signature	Date	
Presentor's name and address and reference (If any) A037 Clive Morris Marshall Peters Heskin Hall Farm Wood Lane Heskin Preston Time Critical Reference	Perion Pos	*A7LMIXSV* A02 23/09/2011