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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 1986

To the Registrar of Companies (Address Overleaf)	For official use	Company number
Name of Company		
* Mistry-Med Limited		
Nature of Business		
Chemists		
I/We give notice that I/We have been appointed 2013	liquidator(s) of the above co	ompany on 20 December
The appointment was by Members		
Type of liquidation Members' Voluntary Liquidation		
Name of Liquidator Office holder number Address Address Youell House 1 Hill Top Coventry CV1 5AB Signature	Date 2	J12/13
Name of Liquidator Office holder number Address Addres	Date	20/12/13
Presentor's name and address and reference (If any) MIS001 Brett Barton Cranfield Business Recovery Ltd Youell House 1 Hill Top Coventry CV1 5AB Time Critical Reference		*A2NWMSL5*