In accordance with section 109 of the Insolvency Act 1986

## 600



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

For further information, please refer to our guidance at www.gov.uk/companieshouse

| 1                    | Company details                                  |   |
|----------------------|--|---|
| Company number       | 0 4 4 7 4 2 6 3                                  | → Filling in this form Please complete in typescript or in        |
| Company name in full | AAA Insurance & Reinsurance Brokers Limited      | bold black capitals.  |
|                      |  |   |
| 2                    | Liquidator's name                                |   |
| Full forename(s)     | Neil John  |   |
| Surname              | Mather   |   |
| 3                    | Liquidator's address                             |   |
| Building name/number | Tower Bridge House                               |   |
| Street               | St Katharine's Way                               |   |
|                      |  |   |
| Post town            | London   |   |
| County/Region        |  |   |
| Postcode             | E 1 W 1 D D                                      |   |
| 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     | 020 7063 4000                                    | public record.  |
| 5                    | Insolvency practitioner number                   |   |
| Number               | 0 0 8 7 4 7                                      |   |
|                      |  |   |
|                      |  |   |
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| 6                      | Liquidator's name <sup>1</sup>  |   |
|------------------------|---|---|
| Full forename(s)       | Guy Robert Thomas   | Other Liquidator's details Use this section to tell us about                              |
| Surname                | Hollander   | another liquidator.   |
| 7                      | Liquidator's address 🛮  |   |
| Building name/number   | Tower Bridge House  | Other Liquidator's details Use this section to tell us about                              |
| Street                 | St Katharine's Way  | another liquidator. Use the continuation page to tell us about more than two liquidators. |
| Post town              | London  | ·   |
| County/Region          |   |   |
| Postcode               |   |   |
| Country                |   |   |
| 8                      | Liquidator's email address or telephone number <sup>©</sup>   | 3 You must give an email address or   |
| Email address          |   | telephone number. All information on this form will appear on the                         |
| Telephone number       | 020 7063 4000   | public record.  |
| 9                      | Insolvency practitioner number  |   |
| Number                 | 0 0 9 2 3 3   |   |
| 10                     | Statement of appointment  |   |
|                        | I confirm the appointment of the liquidator(s) on   |   |
| Date                   |   |   |
| 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   |   |
| Liquidator's signature | Signature X   |   |
| Signature date         | $\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} m & m & m & d \end{bmatrix}$ $\begin{bmatrix} y & y & y & y & d \end{bmatrix}$ $\begin{bmatrix} y & y & y & y & d \end{bmatrix}$ |   |
|                        |   |   |

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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  | Hannah Milton      |  |
|---------------|--------------------|--|
| Company name  | Mazars LLP         |  |
|               |                    |  |
| Address       | Tower Bridge House |  |
|               | St Katharine's Way |  |
|               |                    |  |
| Post town     | London             |  |
| County/Region |                    |  |
| Postcode      | E 1 W 1 D D        |  |
| Country       |                    |  |
| DX            |                    |  |
| Telephone     | 020 7063 4000      |  |

#### ✓ 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