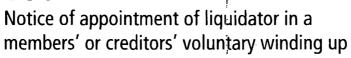
In accordance with section 109 of the Insolvency Act 1986







		1 .	COMPANIES HOUSE
1	Company details		- ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・
Company number	0 4 5 3 9 7 8 0	1	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Tricks Of The Trade (UK) Limited		
		1	
2	Liquidator's name		
Full forename(s)	Jeremy		
Surname	Bleazard		
3	Liquidator's address		
Building name/number	XL Business Solutions Limited		
Street	Premier House		
	Bradford Road		
Post town	Cleckheaton	1	
County/Region		1	
Postcode	B D 1 9 3 T T		
Country			
4	Liquidator's email address or telep	• You must give an email address or	
Email address	jbleazard@xlbs.co.uk	:	telephone number. All information on this form will appear on the public record.
Telephone number	01274 870101		
5	Insolvency practitioner number		
Number	0 9 3 5 4		
		•	
		f	
		:	

600 Notice of appointment of liquidator in a members' or creditors' voluntary winding up Liquidator's name <sup>0</sup> • Other Liquidator's details Full forename(s) Use this section to tell us about Surname another liquidator. Liquidator's address @ Building name/number Other Liquidator's details Use this section to tell us about Street another liquidator. Use the continuation page to tell us about more than two liquidators. Post town County/Region Postcode Country Liquidator's email address or telephone number 9 8 You must give an email address or telephone number. All information **Email address** on this form will appear on the public record. Telephone number **Insolvency practitioner number** Number 10 Statement of appointment I confirm the appointment of the liquidator(s) on <sup>d</sup>0 <sup>d</sup>9 <sup>y</sup>0 Date **Appointment details** 11 The appointment was made by (Tick one)  $\boxed{2}$ Company Creditors 12 Type of liquidation Tick to confirm the liquidation type Members Creditors 13 Sign and date Signature Liquidator's signature X X 0 2 <sup>y</sup> O Signature date

## 600

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

Presenter info	rmation				
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			,		
Company name					
Address					
			_ <del></del>		
Post town			·		
County/Region	- <u>-</u>		1		
Postcode					
Country	1	''	;		
DX			•		
Telephone					
✓ Checklist			·		
We may return forms with information mis		d incorr	ectly or :		
Please make sure yo following:					
☐ The company name information held of					

☐ 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.

## **i** 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