

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)

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies (Address Overleaf)

For official use

Company number

04705845

Name of Company

SLIP AWAT

LIMITED

**Nature of Business** 

SKNIE

AWe give notice that I/We have been appointed liquidator(s) of the above company on

1/11/2016

The appointment was by Creditors MeaBers

Type of liquidation Creditors

MEMBERS

Name of Liquidator

Helen Whitehouse

Office holder number + 9680

| 10 St-Helens-Road-Swañsea SA1 4AW

Signature

Date

10/11/2016

Name of Liquidator

Simon Barriball

Office holder number

11950

10 St Helens Road Swansea SA1 4AW

Signature

**Address** 

Date 10/11/2016

Presentor's name and address and reference (If any):

McAlister & Co Insolvency Practitioners Ltd 10 St Helens Road Swansea SA1 4AW

Time Critical Reference

For Official Use **General Section** 

16/12/2016

#31

#3

COMPANIES HOUSE \*A5KZK993\* 02/12/2016

A11 COMPANIES HOUSE

O5JXXH4Z 17/11/2016 QIQ

COMPANIES HOUSE