

600

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



Companies House



A28 *A7LBZ9J7* 22/12/2018 #505
COMPANIES HOUSE

SATURDAY

1 Company details

Company number 0 4 9 6 0 5 2 7

Company name in full A M Architectural Design Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Julie

Surname Palmer

3 Liquidator's address

Building name/number Units 1-3 Hilltop Business Park

Street Devizes Road

Post town Salisbury

County/Region Wiltshire

Postcode S P 3 4 U F

Country

4 Liquidator's email address or telephone number ^①

Email address Julie.Palmer@begbies-traynor.com

Telephone number 01722 435190

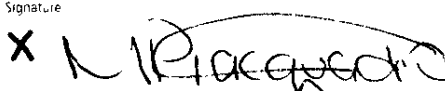

① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 0 0 8 8 3 5

600

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6	Liquidator's name ^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Marco		
Surname	Piacquadio		
7	Liquidator's address ^②		② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	Units 1-3 Hilltop Business Park		
Street	Devizes Road		
Post town	Salisbury		
County/Region	Wiltshire		
Postcode	S P 3 4 U F		
Country			
8	Liquidator's email address or telephone number ^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	Marco.Piacquadio@begbies-traynor.com		
Telephone number	01722 435190		
9	Insolvency practitioner number		
Number	1 9 9 1 0		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 2 0 m 1 2 y 2 0 y 1 8		
11	Appointment details		
	The appointment was made by (Tick one) <input type="checkbox"/> Company <input checked="" type="checkbox"/> Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature 		
Signature date	d 2 1 m 1 2 y 2 0 y 1 8		