In accordance with section 109 of the Insolvency Act 1986

## 600



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

TUESDAY



A07

13/02/2018 #
COMPANIES HOUSE

1	Company details			
Company number	0 5 0 1 7 2 7 3	→ Filling in this form Please complete in typescript or in		
Company name in full	Lloyds Bank Maritime Leasing (No. 12) Limited	bold black capitals.		
2	Liquidator's name			
Full forename(s)	Richard			
Surname	Barker			
3	Liquidator's address			
Building name/number	1			
Street	More London Place			
Post town				
County/Region	London			
Postcode	S E 1 2 A F			
Country	United Kingdom			
4	Liquidator's email address or telephone number •	You must give an email address or telephone number. All information on this form will appear on the		
Email address	rbarker@uk.ey.com			
Telephone number		public record.		
5	Insolvency practitioner number			
Number	1 7 1 5 0			

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6	Liquidator's name <sup>©</sup>								
Full forename(s)	Samantha Jane	Other Liquidator's details Use this section to tell us about							
Surname	Keen	another liquidator.							
7	Liquidator's address ®								
Building name/numbe	1	Other Liquidator's details							
Street	More London Place	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.							
Post town									
County/Region	London								
Postcode	SE1 2 A F								
Country	United Kingdom								
8	Liquidator's email address or telephone number €	You must give an email address or							
Email address	skeen@uk.ey.com	telephone number. All information on this form will appear on the							
Telephone number	on this form will appear on the public record.								
9	Insolvency practitioner number								
Number	9 2 5 0								
10	Statement of appointment								
	I confirm the appointment of the liquidator(s) on								
Date	$\begin{bmatrix} d & d & d \end{bmatrix} \begin{bmatrix} d & d \end{bmatrix} $								
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  **Myalin	×							
Signature date	d 0 d 9 m 2 y 2 y 0 y 1 y 8								

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Pre:	senter information
you do it on the fo	ot have to give any contact information, but if will help Companies House if there is a query rm. The contact information you give will be searchers of the public record.
Contact name	Jack Collis
Company name	Ernst & Young LLP
Address	1
More Lo	ondon Place
Post town	
County/Region	London
Postcode	S E 1 2 A F
Country	United Kingdom
DX	
Telephone	020 7951 5925
<b>√</b> Che	cklist
	return forms completed incorrectly or ormation missing.
Please i	make sure you have remembered the ng:
	company name and number match the mation 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.

### **7** 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

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600 - continuation page

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1	Compa	any c	letail	s		· · · · · · · · · · · · · · · · · · ·				
Company number										
Company name in full			1	<u> </u>						-
2	Liquid	ator'	s nar	ne						
Full forename(s)										
Surname										-
3	Liquid	ator	s add	dress						
Building name/number				-						
Street										-
Post town										-
County/Region										-
Postcode	Ė									
Country				<u>' '</u>	<u></u>	<u> </u>				-
4	Liquid	ator	s em	ail a	ddres	s or tele	phone n	umber	0	
Email address	<u> </u>									● You must give an email address or
Telephone number		<u> </u>								telephone number. All information on this form will appear on the public record.
5	Insolv	ency	prac	titio	ner ni	umber				
Insolvency practitioner number										