CHFP080

Please do not

FORM No 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

Write in this margin Please complete legibly preferably in black type or bold block lettering *Insert full name

of company

Pursuant to section 109 of the Insolvency Act 1986			
To the Registrar of Companies (Address Overleaf)	For offic	ial use	Company number
Name of Company	<u> </u>	·	
Guardian Care Homes (West) Limited	d		
Nature of Business			
Residential care for the elderly			
I give notice that I have been appoint March 2016	ed as an additional joint liqu	udator of the abo	ove company on 23
The appointment was by Creditors			
Type of liquidation Creditors Volunta	ry Liquidation		
Name of Liquidator Adrian Charle Office holder number 9664 Address CVR Global New Fetter P /56 Fetter Lar	LLP Place West		
Signature		Date 30 /3 /6	
Name of Liquidator Office holder number Address			
Signature		Date	
		·	
Presenters name and address and reference (If any) G30201003 Kevin J Hellard	For Official Use General Section	Post re	oom

Grant Thornton UK LLP 3 Finsbury Square London EC2P 2YU

Time Critical Reference

A18

31/03/2016 COMPANIES HOUSE