CHFP080

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

Please do not

FORM No. 600

Write in this margin Please complete legibly preferably ın black type or bold block

lettering *Insert full name of company

Pursuant to section 10	9 of the Insolvency Act 19	86	
To the Registrar of Co (Address Overleaf)	mpanies	For official use	Company number 05380159
Name of Company			
* The Knutsford Wine	Bar Limited		
Nature of Business			
Restaurant and Wine	Bar	_	
I/Me give notice that I	, ,	liquidator(x) of the above com	npany on 24 February 2016
Type of liquidation Me	embers		
Name of Liquidator Office holder number Address	Vincent A Simmons 8898 7 St Petersgate Stockport Cheshire		

Signature	VA S — S	Date 24 February 2016
Name of Liquidator Office holder number		
Address		

Presentor's name and address and reference (If any) Knutsford Vincent A Simmons Bennett Verby 7 St Petersgate Stockport Cheshire

SK1 1EB

Time Critical Reference

Signature

SK1 1EB

For Official Use **General Section**

Post room

Date

A23 26/02/2016 **COMPANIES HOUSE**