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



Companies House

MONDAY



A8KY9VZE

A19

23/12/2019

#294

COMPANIES HOUSE

1 Company details

Company number 0 5 9 0 4 4 3 7

Company name in full 06 Zoo Ltd

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

2 Liquidator's name

Full forename(s) Michael

Surname Pallott

3 Liquidator's address

Building name/number Tower Bridge House

Street St Katharine's Way

Post town London

County/Region

Postcode E 1 W 1 D D

Country

4 Liquidator's email address or telephone number ¹

Email address

Telephone number 020 7063 4000

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 2 3 6 5 0

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6 Liquidator's name [ⓐ]

Full forename(s) Neil John

Surname Mather

ⓑ Other Liquidator's details
Use this section to tell us about another liquidator.

7 Liquidator's address [ⓐ]

Building name/number Tower Bridge House

Street St Katharine's Way

Post town London

County/Region

Postcode E 1 W 1 D D

Country

ⓑ 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.

8 Liquidator's email address or telephone number [ⓐ]

Email address

Telephone number 020 7063 4000

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

9 Insolvency practitioner number

Number 0 0 8 7 4 7

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date 1 2 1 2 2 0 1 9

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

X

X

Signature date

2 0 1 2 2 0 1 9

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 **Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name **Yasmin Mohamud**

Company name **Mazars LLP**

Address **Tower Bridge House**

St Katharine's Way

Post town **London**

County/Region

Postcode **E 1 W 1 D D**

Country

DX

Telephone **020 7063 4000**

 **Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- The company name and number match the information 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.

 **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