G

CHFP080

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering *Insert full name of company **FORM No. 600**

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

600

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies (Address Overleaf)	For official use	Company number 05964423
Name of Company		
* ABC Beds Limited		
Nature of Business		
Holiday Accommodation Agent		
I give notice that I have been appointed liquidate The appointment was by members and creditors Voluntary Liquidation.	ditors	January, 2012
Name of Liquidator Office holder number Address 1 Kings Avenue Winchmore Hill London N21 3NA Signature	Date 10 Jan	uany 2012
SAMMAS	Date 10 Jan	uary 2012
Name of Liquidator Office holder number Address		
Signature	Date	
	THURSDAY	*A10D20OI* 12/01/2012 #343 COMPANIES HOUSE