In accordance with section 109 of the Insolvency Act 1986

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# Companies House

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

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04/12/2020 #33 COMPANIES HOUSE

1	Company details	<del></del>	
Company number	0 6 0 0 3 4 3 2	→ Filling in this form Please complete in typescript or in	
Company name in full	A and R Installations Limited	bold black capitals.	
•		_	
2	Liquidator's name		
Full forename(s)	Nicholas Andrew		
Surname	Stratten		
3	Liquidator's address		
Building name/number	Third Floor		
Street	112 Clerkenwell Road		
Post town	London		
County/Region			
Postcode	E C 1 M 5 S A		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number	0207 099 6086	public record.	
5	Insolvency practitioner number		
Number	2 2 1 7 0		

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6	Liquidator's name <sup>•</sup>	·
Full forename(s)	Hasib	Other Liquidator's details Use this section to tell us about
Surname	Howlader	another liquidator.
7	Liquidator's address @	
Building name/numb	er Third Floor	Other Liquidator's details
Street	112 Clerkenwell Road	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town	London	_
County/Region		
Postcode	ECIM 5SA	
Country		_
8	Liquidator's email address or telephone number ©	You must give an email address or
Email address		telephone number. All information on this form will appear on the
Telephone number	0207 099 6086	public record.
9	Insolvency practitioner number	
Number	2 0 3 5 0	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date		
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 date	$\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} m & m & m & d \end{bmatrix}$ $\begin{bmatrix} y_2 & y_0 & y_2 & y_0 \end{bmatrix}$	

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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	Jerome Moutrage	
Company name	Hudson Weir Limited	
Address	Third Floor	
	112 Clerkenwell Road	
Post town	London	
County/Region		
Postcode	ECIM 5SA	
Country		
DX		
Telephone	0207 099 6086	

#### ✓ 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.

#### 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