G	FORM No. 600			600
CHFP080	Notice of appointment of liquidator Voluntary winding up (Members or Creditors)	-		
Please do not 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 offi	icial use	Company number 06422747
	Name of Company			
	* Abrocat Limited			
	Nature of Business			
	financial management			
	I give notice that I have been appointed liquidator of the above company on 2 April 2014			
	The appointment was by Members			
	Type of liquidation Members			
	Name of Liquidator Sue Stockley Office holder number 7889 Address The Old Brushworks 56 Pickwick Road Corsham SN13 9BX			
	Signature		Date 4 April 2014	1
	Name of Liquidator Office holder number Address			
	Signature		Date	
				······································
	Presenter's name and address and reference (if any) 14041 Sue Stockley 3 in Partnership Limited The Old Brushworks 56 Pickwick Road Corsham SN13 9BX Time Critical Reference	For Official Use General Section	A27	*A35LLR1T* 11/04/2014 #183 MPANIES HOUSE