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



Companies House

TUESDAY



AC193T9K

A05

11/04/2023

#326

COMPANIES HOUSE

1 Company details

Company number 06434091
Company name in full UTILYX ASSET MANAGEMENT LIMITED

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

2 Liquidator's name

Full forename(s) EMMA
Surname CRAY

3 Liquidator's address

Building name/number PRICEWATERHOUSECOOPERS LLP
Street ONE CHAMBERLAIN SQUARE
Post town BIRMINGHAM
County/Region
Postcode B33AX
Country UNITED KINGDOM

4 Liquidator's email address or telephone number ^①

Email address emma.cray@pwc.com
Telephone number

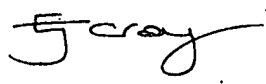
① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 17450

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6	Liquidator's name ^①	
Full forename(s)	CAROLINE	
Surname	RIFKIND	
		① Other Liquidator's details Use this section to tell us about another liquidator.
7	Liquidator's address ^②	
Building name/number	PRICEWATERHOUSECOOPERS LLP	
Street	7 MORE LONDON RIVERSIDE	
Post town	LONDON	
County/Region		
Postcode	S E 1 2 R T	
Country	UNITED KINGDOM	
		② 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 ^③	
Email address	caroline.rifkind@pwc.com	
Telephone number		
		③ 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	2 2 5 9 0	
10	Statement of appointment	
I confirm the appointment of the liquidator(s) on		
Date	d 3 d 0 m 0 m 3 y 2 y 0 y 2 y 3	
11	Appointment details	
The appointment was made by (Tick one)		
<input checked="" type="checkbox"/> Company		
<input type="checkbox"/> Creditors		
12	Type of liquidation	
Tick to confirm the liquidation type		
<input checked="" type="checkbox"/> Members		
<input type="checkbox"/> Creditors		
13	Sign and date	
Liquidator's signature	Signature X  X	
Signature date	d 0 d 5 m 0 m 4 y 2 y 0 y 2 y 3	

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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	SERENA HERIAN
Company name	PRICEWATERHOUSECOOPERS
	LLP
Address	ONE CHAMBERLAIN SQUARE
Post town	BIRMINGHAM
County/Region	
Postcode	B 3 3 A X
Country	UNITED KINGDOM
DX	
Telephone	

**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

600 - continuation page

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1 Company details

Company number	<input type="text"/>	
Company name in full	<input type="text"/>	

2 Liquidator's name

Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	

3 Liquidator's address

Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	

4 Liquidator's email address or telephone number ^①

Email address	<input type="text"/>	① You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	

5 Insolvency practitioner number

Insolvency practitioner number	<input type="text"/>	
	<input type="text"/>	