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



Companies House

FRIDAY




A21 *A7JTTC40* 30/11/2018 #230
COMPANIES HOUSE

1	Company details	
Company number	0 6 6 2 4 8 6 2	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Dee's Domiciliary Care Services Limited	
2	Liquidator's name	
Full forename(s)	Julie	
Surname	Palmer	
3	Liquidator's address	
Building name/number	Units 1-3 Hilltop Business Park	
Street	Devizes Road	
Post town	Salisbury	
County/Region	Wiltshire	
Postcode	S P 3 4 U F	
Country		
4	Liquidator's email address or telephone number ^①	① You must give an email address or telephone number. All information on this form will appear on the public record
Email address	Julie.Palmer@begbies-traynor.com	
Telephone number	01722 435190	
5	Insolvency practitioner number	
Number	0 0 8 8 3 5	

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6	Liquidator's name ^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)			
Surname			
7	Liquidator's address ^②		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.
Building name/number			
Street			
Post town			
County/Region			
Postcode			
Country			
8	Liquidator's email address or telephone number ^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address			
Telephone number			
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
I confirm the appointment of the liquidator(s) on			
Date	d	0	2
	m	0	8
	y	2	0
	y	1	8
11	Appointment details		
The appointment was made by (Tick one)			
<input checked="" type="checkbox"/> Company <i>court order</i>			
<input type="checkbox"/> Creditors			
12	Type of liquidation		
Tick to confirm the liquidation type			
<input type="checkbox"/> Members			
<input checked="" type="checkbox"/> Creditors			
13	Sign and date		
Liquidator's signature	Signature 		X
Signature date	d	2	8
	m	1	1
	y	2	0
	y	1	8

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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

Company name **Begbies Traynor (Central) LLP**

Address **Units 1-3 Hilltop Business Park
Devizes Road**

Post town **Salisbury**

County/Region **Wiltshire**

Postcode **S P 3 4 U F**

Country

DX

Telephone **01722 435190**

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