In accordance with section 109 of the Insolvency Act 1986

600

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



08/12/2018 **COMPANIES HOUSE** *A7IWNSK1* A26 17/11/2018 #91 **COMPANIES HOUSE** Company details 0 6 8 2 6 8 → Filling in this form 3 Company number Please complete in typescript or in bold black capitals. Company name in full PROSLOPE LIMITED Liquidator's name Full forename(s) DOROTHY Surname **BROWN** 3 Liquidator's address Building name/number DREWITT HOUSE Street 865 RINGWOOD ROAD Post town **BOURNEMOUTH** County/Region Postcode в Н 1 8 W 1 | L Country Liquidator's email address or telephone number • 4 You must give an email address or telephone number. All information **Email address** dorothy@evenkeelfinancial.co.uk on this form will appear on the public record. Telephone number 01202 237337 5 Insolvency practitioner number Number 3 8 3

•	600		
• •	Notice of appointment of liquidator in a members' or creditors voluntary winding up		
6	Liquidator's name ♥		
Full forename(s)		Other Liquidator's details	
Surname		Use this section to tell us about another liquidator.	
7	Liquidator's address •	1	
Building name/number		Other Liquidator's details	
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
Post town			
County/Region			
Postcode			
Country			
8	Liquidator's email address or telephone number 9	You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	15 77 2018		
11	Appointment details		
	The appointment was made by (Tick one)		
	☐ Creditors		
12	Type of liquidation		
_	Tick to confirm the liquidation type Members Creditors		
13	Sign and date		
Liquidator's signature	Signature X Deliberary	×	
Signature date	1/6/ 1/7 /2/0//8		