In accordance with section 109 of the Insolvency Act 1986

## 600



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

SATURDAY



er to

A43 22/12/2018
COMPANIES HOUSE

	Company details		
Company number	0 6 9 6 9 2 0 3	→ Filling in this form Please complete in typescript or in bold black capitals	
Company name in full	H & M Services (Merseyside) Limited		
2	Liquidator's name		
Full forename(s)	lan C	:	
Surname	Brown		
3	Liquidator's address		
Building name/number	Yorkshire House		
Street	18 Chapel Street		
Post town	Liverpool		
County/Region			
Postcode	L 3 9 A G		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or	
Email address	icb@parkinsbooth.co.uk	telephone number All information on this form will appear on the public record	
Telephone number	0151 236 4331		
5	Insolvency practitioner number		
Number	8 6 2 1		

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6	Liquidator's name <sup>0</sup>	
Full forename(s)	John P	Other Liquidator's details Use this section to tell us about
Surname	Fisher	another liquidator.
7	Liquidator's address o	
Building name/number	Yorkshire House	Other Liquidator's details
Street	18 Chapel Street	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town	Liverpool	
County/Region		
Postcode	L 3 9 A G	
Country		
8	iidator's email address or telephone number <sup>❸</sup> ⑤ You must give an email address	
Email address	jpf@parkinsbooth.co.uk	telephone number. All information on this form will appear on the
Telephone number	0151 236 4331	public record.
9	Insolvency practitioner number	
Number	9 4 2 0	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	2   0   1   2   2   0   1   8	
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	X / Ba	×
	$\begin{bmatrix} 2 & 1 & 1 & 2 & \sqrt{2} & \sqrt{0} & \sqrt{1} & 8 \end{bmatrix}$	

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# 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.

#### Checklist

T-lephon

We may return forms completed incorrectly or with information missing.

0151 236 4331

### 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