FORM No. 600

CHFP000

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	Reg	gistrar	of	Companies
			overle	_	_

Name of Company

For official use

Company number

07133151

Cushionflex Limited

Nature of Business

Sale of Footwear

I give notice that I have been appointed liquidator of the above company

on 10 February 2016

† delete as appropriate The appointment was by [the company][the creditors]†

Type of liquidation [Members] [Creditors]†

Name Of Liquidator	Philip Booth		
Office Holder Number	9470		
Address	Booth & Co, Coopers House, Intake Lane		
	Ossett, WF5 0RG		
Signature P.	Date 10 February 2016		

Name of Liquidator					
Office holder number					
Address					
Signature	Date				

Presenter's name, address and reference (if any)

For official Use General Section

Post room

Time Critical Reference



A10

11/02/2016 COMPANIES HOUSE