In accordance with section 109 of the Insolvency Act 1986

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

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details				
Company number	0 7 2 9 6 7 8 2	Filling in this form			
Company name in full	THE FAMILY TENT SHOP LIMITED	Please complete in typescript or in bold black capitals.			
		_			
2	Liquidator's name	,			
Full forename(s)	JAMES E				
Surname	PATCHETT	_			
3	Liquidator's address				
Building name/number	5				
Street	PARK COURT	_			
	PYRFORD ROAD	_			
Post town	WEST BYFLEET	_			
County/Region	SURREY	_			
Postcode	K T 1 4 6 S D				
Country	UK	_			
4	Liquidator's email address or telephone number •	• You must give an email address or			
Email address	JAMES.PATCHETT@TURPINBA.CO.UK	telephone number. All information on this form will appear on the			
Telephone number	02086617878	public record.			
5	Insolvency practitioner number				
Number	9 3 4 5				

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6	Liquidator's name ⁰				
Full forename(s)	MARTIN	Other Liquidator's details Use this section to tell us about			
Surname	CHARLES ARMSTRONG	another liquidator.			
7	Liquidator's address [®]				
Building name/numb	er 5	Other Liquidator's details			
Street	PARK COURT	Use this section to tell us about another liquidator. Use the			
	PYRFORD ROAD	continuation page to tell us about more than two liquidators.			
Post town	WEST BYFLEET				
County/Region	SURREY				
Postcode	K T 1 4 6 S D				
Country	UK				
8	Liquidator's email address or telephone number 9	You must give an email address or			
Email address	MARTIN.ARMSTRONG@TURPINBA.CO.UK	telephone number. All information on this form will appear on the			
Telephone number	02086617878	public record.			
9	Insolvency practitioner number				
Number	6 2 1 2				
10	Statement of appointment				
	I confirm the appointment of the liquidator(s) on				
Date	$\begin{bmatrix} d_2 \end{bmatrix} \begin{bmatrix} d_3 \end{bmatrix} \begin{bmatrix} m_0 \end{bmatrix} \begin{bmatrix} m_1 \end{bmatrix} \begin{bmatrix} y_2 \end{bmatrix} \begin{bmatrix} y_0 \end{bmatrix} \begin{bmatrix} y_2 \end{bmatrix} \begin{bmatrix} y_3 \end{bmatrix}$				
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	<u>'</u>			
Liquidator's signature					
Elquidator 9 signature	X JEPAth.	×			
Signature date	$\begin{bmatrix} 1 & 1 & 1 & 1 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 $				

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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	UME	ESH	KAN	/AL				
Company nam	Company name TURPIN BARKER ARMSTRONG				_			
Address	5							
PARK	PARK COURT, PYRFORD ROAD							
Post town	WES	ST B	YFLI	EET				
County/Region	SUR	REY	,					
Postcode		K	Т	1	4	6	S	D
Country	UK							
DX								
Telephone	0208	3661	7878	3				

✓ 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

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1	Company details	
Company number		
Company name in full		
2	Liquidator's name	
Full forename(s)		
Surname		
3	Liquidator's address	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
4	Liquidator's email address or telephone number •	
Email address		● You must give an email address or telephone number. All information
Telephone number		on this form will appear on the public record.
5	Insolvency practitioner number	pasite receitai
Insolvency practitioner		
number		