

CHFP080

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

Please do not Write in this margin

Pursuant to section 109 of the Insolvency Act 1986

Please complete legibly preferably in black type or bold block iettering *Insert full name

of company

To the Registrar of Companies (Address Overleaf)

For official use

Company number

07327522.

Name of Company

T .				
AC	MUA	KH	ASSOCIATES	LIMITED

Nature of Business

OTHER ACTIVITIES AUXILIARY TO FUSURANCE & PENSION

The appointment was by Creditors

Type of liquidation Creditors

Name of Liquidator

Helen Whitehouse

Office holder number

9680

Address

10 St Helens Road Swansea SA1 4AW

Signature

Date 15/3/16

Name of Liquidator

Office holder number

Address

Simon Barriball

10 St Helens Road Swansea SA1 4AW

Signature

Date

15/3/16

Presentor's name and address and reference (If any)

McAlister & Co Insolvency Practitioners Ltd 10 St Helens Road

Swansea

SA1 4AW

Time Critical Reference

For Official Use **General Section**

Post room





A13

16/03/2016 **COMPANIES HOUSE** #280