CHWP000

Please do not

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

FORM No. 600

Write in this margin Please complete legibly preferably in black type or bold block lettering

*Insert full name of company

Pursuant to section 10	9 of the Insolvency Act 1986	3	
To the Registrar of Co (Address Overleaf)	mpanies	For official use	Company number 08019915
Name of Company			
* ABI Secruity Service	s Ltd		
Nature of Business			
Security Services			
29 November, 2017	by Members & Creditors	uidator(s) of the above comp	any on
Name of Liquidator Office holder number Address	Zafar Iqbal 6578 Hunter House 109 Snakes Lane West Woodford Green Essex, IGN 0DY	Data 20 Na.	
Signature ~	<u> </u>	Date 30 Nove	emper 2017
Name of Liquidator Office holder number Address			

Signature Date

Presentor's name and address and reference (If any): ABI591 Zafar Iqbal Cooper Young **Hunter House** 109 Snakes Lane West Woodford Green Essex, IG8 0DY

Time Critical Reference

For Official Use **General Section**

Post room

