

# G

CHFP080

FORM No 600

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

# 600

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 Registrar of Companies  
(Address Overleaf)

For official use

Company number

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08057751
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Name of Company

\* 5NT Limited

Nature of Business

Consultancy

I/We give notice that I/We have been appointed liquidator(s) of the above company on  
3 August, 2016

The appointment was by Members

Type of liquidation Members

Name of Liquidator	Colin Nicholls
Office holder number	9052
Address	1 Castle Street Worcester WR1 3AA

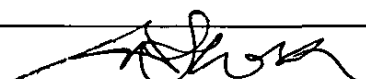
Signature



Date 10 08 16

Name of Liquidator	Andrew Shackleton
Office holder number	9724
Address	1 Castle Street Worcester WR1 3AA

Signature



Date 10 08 16

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

00135  
Colin Nicholls  
Smart Insolvency Solutions Ltd  
1 Castle Street  
Worcester  
WR1 3AA

Time Critical Reference

For Official Use  
General Section

MONDAY



\*A5DF030B\*

A16

15/08/2016

#8

COMPANIES HOUSE