

600

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



Companies House

WEDNESDAY



AAANOFI6

A11

11/08/2021

#48

COMPANIES HOUSE

Refer to

1 Company details

Company number 0 8 2 7 3 9 8 0

Company name in full Blueprint New Business Services Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Amanda

Surname Wade

3 Liquidator's address

Building name/number 30 Finsbury Square

Street

Post town London

County/Region

Postcode E C 2 A 1 A G

Country

4 Liquidator's email address or telephone number ①

Email address

Telephone number 0161 953 6900

① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 9 4 4 2

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6 Liquidator's name ^①

Full forename(s)

Jackie

Surname

Stringer

① Other Liquidator's details

Use this section to tell us about another liquidator.

7 Liquidator's address ^②

Building name/number

2 Glass Wharf

Street

Temple Quay

Post town

Bristol

County/Region

Postcode

B S 2 0 E L

Country

② Other Liquidator's details

Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

8 Liquidator's email address or telephone number ^③

Email address

Telephone number

0161 953 6900

③ You must give an email address or telephone number. All information on this form will appear on the public record.**9 Insolvency practitioner number**

Number

9 1 7 6

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date

d 0 3 m 0 6 y 2 0 2 1

11 Appointment detailsThe appointment was made by
(Tick one)☐ Company☒ Creditors**12 Type of liquidation**

Tick to confirm the liquidation type

☐ Members☒ Creditors**13 Sign and date**

Liquidator's signature

Signature

X 

X

Signature date

d 1 0 m 0 8 y 2 0 2 1

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

Matthew Drinkwater

Company name

Grant Thornton UK LLP

Address

4 Hardman Square

Spinningfields

Post town

Manchester

County/Region

Postcode

M 3 3 E B

Country

DX

Telephone

0161 953 6900

**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