In accordance with section 109 of the Insolvency Act 1986

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Companies House

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

13/08/2020 COMPANIES HOUSE

1	Company details	_
Company number	0 8 2 8 8 6 5 2	Filling in this form Please complete in typescript or in .
Company name in full	Bentley & Doherty Limited	bold black capitals.
		7
2	Liquidator's name	
ull forename(s)	Gordon Allan Mart	
ourname	Simmonds	
3	Liquidator's address	
Building name/number	Crown House	
treet	217 Higher Hilligate	
ost town	Stockport	7
County/Region 🕝	Cheshire,	
ostcode	S K 1 3 R B	_
ountry		7
1	Liquidator's email address or telephone number •	• You must give an email address or
mail address	gordon@simmondsandco.com	telephone number. All information on this form will appear on the
elephone number	0161 476 5445	public record.
5	Insolvency practitioner number	
lumber	5 7 2 9	•

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6	Liqu	idate	or's	nam	e •)		* .	٠.			·
Full forename(s)			-			•		•	<u> </u>		· . ·	Other Liquidator's details Use this section to tell us about another liquidator
Surname												
7	Liqu	idat	or's	addr	ess	•				•		
Building			•									Other Liquidator's details
name/number												
Street	,											Use this section to tell us about another liquidator. Use the
			•									continuation page to tell us about more than two liquidators.
Post town		7-										<i>,</i>
County/Region	<u> </u>		,				·					
Postcode						T						
Country	†	L	J	.1		1		1				
8	Liqui	idato	or's (emai	l add	ress o	r tele	phone	numbei	r •		
Email address												You must give an email address or telephone number. All Information on this form will appear on the
Telephone number												public.record.
9	Inso	lven	су рі	acti	tione	num	ber	· · · · · · · · · · · · · · · · · · ·			•	<u> </u>
Number				,		\top						
10	State	eme	nt of	арр	ointn	nent						
							liguida	tor(s) on				\
Date	0	7		0	8	2		20]			
11	App	ointr	nent		_ •• _	<u> </u>	1 - 1		l	·	1	
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	□ (The ap	Credit			الملممية	h.,	•				.	
	rue ap	hoint	anen)	was	made i	υy						

12	Type of liquidation				
	☐ Members ☐ Creditors				
	Tick to confirm the liquidation type	* 	· :		
13	Sign and date		•		
Liquidator's signatu	× Adia	more	X .		
Signature date	'signature	20	. !		
	· · · · · · · · · · · · · · · · · · ·				

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Present	er information
you do it will h on the form. Th	ve to give any contact information, but if elp Companies House If there is a query ne contact information you give will be hers of the public record.
Gordon A.M.	Simmonds
Simmonds &	Company
Crown House	<u> </u>
217 Higher H	illgate
	•
Ŝtockport	
Cheshire	
Postcode	S K 1 3 R B
ĎX	
0161 476 54	45
✓ Checkli	st
	rn forms completed incorrectly or tion missing.
Please make	sure you have remembered the

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