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



Companies House

SATURDAY



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05/02/2022

#112

COMPANIES HOUSE

1 Company details

Company number 0 8 4 0 0 8 0 1

Company name in full Dancasti Limited

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

2 Liquidator's name

Full forename(s) Darren

Surname Wilson

3 Liquidator's address

Building name/number 6

Street Royal Mews

Post town Southend on Sea

County/Region Essex

Postcode S S 1 1 D B

Country United Kingdom

4 Liquidator's email address or telephone number ^①

Email address darren@dkfinsolvency.com

Telephone number 01702 333 105


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 5 1 8

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6	Liquidator's name ^①		
Full forename(s)			① Other Liquidator's details Use this section to tell us about another liquidator.
Surname			
7	Liquidator's address ^②		
Building name/number			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.
Street			
Post town			
County/Region			
Postcode	<div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>		
Country			
8	Liquidator's email address or telephone number ^③		
Email address			③ You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number			
9	Insolvency practitioner number		
Number	<div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	<div> <div>d</div> <div>0</div> <div>d</div> <div>3</div> <div>m</div> <div>0</div> <div>m</div> <div>2</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>2</div> <div>y</div> <div>2</div> </div>		
11	Appointment details		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input checked="" type="checkbox"/> Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature <div> <div>X</div> <div></div> <div>X</div> </div>		
Signature date	<div> <div>d</div> <div>0</div> <div>d</div> <div>3</div> <div>m</div> <div>0</div> <div>m</div> <div>2</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>2</div> <div>y</div> <div>2</div> </div>		

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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

Company name **DKF Insolvency Ltd**

Address **6 Royal Mews**

Post town **Southend on Sea**

County/Region **Essex**

Postcode **S S 1 1 D B**

Country **United Kingdom**

DX

Telephone **01702 333105**



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