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



er to

#216

20/12/2018 COMPANIES HOUSE

1	Company details		
Company number	0 8 4 0 4 1 5 0	→ Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	SHEZ KNIGHTSBRIDGE LIMITED		
2	Liquidator's name		
Full forename(s)	MARTIN CHARLES		
Surname	ARMSTRONG		
3	Liquidator's address		
Building name/numbe	ALLEN HOUSE		
Street	1 WESTMEAD ROAD		
Post town	SUTTON		
County/Region	SURREY		
Postcode	S M 1 4 L A		
Country	UNITED KINGDOM		
4	Liquidator's email address or telephone number •	• You must give an email address o	
Email address	tba@turpinba.co.uk	telephone number. All informatio on this form will appear on the public record.	
Telephone number	020 8661 7878		
5	Insolvency practitioner number		
Number	0 0 0 6 2 1 2		

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6	Liquidator's name [©]	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address o	
Building name/number		Other Liquidator's details
Street		 Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town		_
County/Region		
Postcode		
Country		
8	Liquidator's email address or telephone number €	You must give an email address o
Email address		telephone number. All information on this form will appear on the
Telephone number		public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{bmatrix} d & 1 & d & 0 & 0 \end{bmatrix} \begin{bmatrix} m & 1 & m & 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 1 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 1 & 0 & 0 & 0 \\ y & 1 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 1 & 0 & 0 & 0 \\ y & 1 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 1 & 0 & 0 & 0 \\ y & 1 & 0 & 0 & 0 & 0 \\ y & 1 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 1 & 0 & 0 & 0 \\ y & 1 & 0 & 0 & 0 \\ y & 1 & 0 $	
11	Appointment details	
	The appointment was made by (Tick one) ☐ Company ☐ Creditors	
12	Type of liquidation	
_	Tick to confirm the liquidation type ☐ Members ☐ Creditors	
13	Sign and date	
.iquidator's signature	Mar) /	×
Signature date	\[\begin{picture}(1) & 1 & \begin{picture}(1)	

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You do not have to give any conta

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	SAM GOODLIFFE	
Company name TURPIN BARKER ARMSTRONG		
Address	ALLEN HOUSE	
1 WESTMEAD ROAD		
Post town	SUTTON	
County/Region	SURREY	
Postcade	S M 1 4 L A	
Country	UNITED KINGDOM	
DX		
Telephone	020 8661 7878	

✓ 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