In accordance with section 109 of the Insolvency Act 1986

600

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



HURSDAY



ier to

A25 28/06/2018 COMPANIES HOUSE

**Company details** → Filling in this form 8 4 1 6 0 Company number Please complete in typescript or in bold black capitals. **Carrington Estates Limited** Company name in full Liquidator's name Full forename(s) Michelle Surname Mills Liquidator's address Building name/number | Third Floor Street 112 Clerkenwell Road Post town London County/Region Postcode E C 1 5 М SA Country Liquidator's email address or telephone number • • You must give an email address or telephone number. All information **Email address** michelle@hudsonweir.co.uk on this form will appear on the public record. Telephone number 0207 099 6086 Insolvency practitioner number Number 1

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Building name/number  Street	iquidator's address o	Other Liquidator's details Use this section to tell us about another liquidator.
7 L Building name/number Street	iquidator's address <sup>©</sup>	,
Building name/number Street	iquidator's address <sup>©</sup>	······································
Street		
		Other Liquidator's details
<del></del>		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 L	iquidator's email address or telephone number ®	You must give an email address or
Email address	<u> </u>	telephone number. All information on this form will appear on the public record.
Telephone number		
9	Insolvency practitioner number	<u> </u>
Number		
10 5	Statement of appointment	•
	I confirm the appointment of the liquidator(s) on	
Date	1 2 0 6 2 0 18	
11 A	Appointment details	
	The appointment was made by (Tick one)  ☑ Court □ Creditors	
12 T	ype of liquidation	
	Tick to confirm the liquidation type  ☐ Members ☑ Creditors	
13 S	ign and date	<u> </u>
inquidator a signature	X X	
Signature date	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	

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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	Michelle Mills	
Company name	Hudson Weir Limited	
	-	
Address	Third Floor	
	112 Clerkenwell Road	
Post town	London	
County/Region		
Postcode	ECIM 5SA	
Country		
DX	······································	
Telephane	0207 099 6086	

#### ✓ 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.

#### **i** 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