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



Companies House

WEDNESDAY



\*A8Y4WZSW\*

A11

05/02/2020

#73

COMPANIES HOUSE

### 1 Company details

Company number 0 8 6 0 6 2 4 0

Company name in full Paish Capital Limited

#### → Filling in this form

Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s) Neil Frank

Surname Vinnicombe

### 3 Liquidator's address

Building name/number 14 Queen Square

Street

Post town Bath

County/Region

Postcode B A 1 2 H N

Country

### 4 Liquidator's email address or telephone number <sup>①</sup>

Email address Neil.Vinnicombe@btguk.com

Telephone number 01225 316040

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

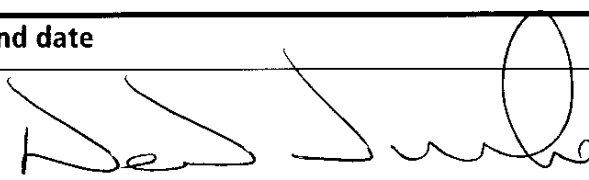
### 5 Insolvency practitioner number

Number 0 0 9 5 1 9



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<b>6</b>	<b>Liquidator's name <sup>①</sup></b>		<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)	Simon Robert		
Surname	Haskew		
<b>7</b>	<b>Liquidator's address <sup>②</sup></b>		<b>② Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	14 Queen Square		
Street	Bath		
Post town	BA1 2HN		
County/Region			
Postcode			
Country			
<b>8</b>	<b>Liquidator's email address or telephone number <sup>③</sup></b>		<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>
Email address	Simon.Haskew@btguk.com		
Telephone number	01225 316040		
<b>9</b>	<b>Insolvency practitioner number</b>		
Number	0 0 8 9 8 8		
<b>10</b>	<b>Statement of appointment</b>		
	I confirm the appointment of the liquidator(s) on		
Date	d 3 1 m 0 1 y 2 0 2 0		
<b>11</b>	<b>Appointment details</b>		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
<b>12</b>	<b>Type of liquidation</b>		
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors		
<b>13</b>	<b>Sign and date</b>		
Liquidator's signature	Signature X  X		
Signature date	d 0 3 m 0 2 y 2 0 2 0		



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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	Joseph Ewins
Company name	Begbies Traynor (Central) LLP
Address	14 Queen Square
Post town	Bath
County/Region	
Postcode	B A 1 2 H N
Country	
DX	
Telephone	01225 316040

### 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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)