In accordance with Rule 3.54 of the Insolvency (England & Wales) Rules 2016 & paragraph 78(5)(b) of Schedule B1 to the Insolvency Act 1986.

AM19

Notice of extension of period of administration

FRIDAY

A24

16/06/2017 COMPANIES HOUSE #201

1	Company details	
Company number	0 8 7 0 6 2 9 9	→ Filling in this form Please complete in typescript or in
Company name in full	CMO BIDCO LIMITED	bold black capitals.
		_
2	Court details	
Court name	HIGH COURT OF JUSTICE, CHANCERY DIVISION,	
	COMPANIES COURT	-
Court number	3 3 6 2 O F 2 0 1 6	
3	Administrator's name	
Full forename(s)	CATHERINE	_
Surname	WILLIAMSON	
4	Administrator's address	
Building name/number	THE ZENITH BUILDING	
Street	26 SPRING GARDENS	
Post town	MANCHESTER	
County/Region		
Postcode	M 2 1 A B	
Country		-

AM19

Notice of extension of period of administration

5	Administrator's name o		
Full forename(s)	PETER	Other administrator Use this section to tell us about	
Surname	SAVILLE	another administrator.	
6	Administrator's address @		
Building name/numl	per 6	Other administrator Use this section to tell us about	
Street	NEW STREET SQUARE	another administrator.	
Post town	LONDON		
County/Region			
Postcode	E C 4 A 3 B F		
Country			
7	Administration extended until		
Date	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
8	Extension of period of administration		
	The period of administration was extended:		
	By order of the court		
	With the consent of the company's creditors		
9	Sign and date		
Signature	Signature	~	
	X Cmare	×	
Signature date	1 5 6 2 01, 7		

AM19

Notice of extension of period of administration

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 JENNA CARR Company name ALIXPARTNERS

Address THE ZENITH BUILDING
26 SPRING GARDENS

Post town MANCHESTER
County/Region

Postcode M 3 4 A B

Postcode M 2 1 A B Country

✓ Checklist

Telephone

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

Continuation page Name and address of insolvency practitioner

- ✓ What this form is for
 Use this continuation page to
 tell us about another insolvency
 practitioner where more than
 2 are already jointly appointed.
 Attach this to the relevant form.
 Use extra copies to tell us of
- What this form is NOT for You can't use this continuation page to tell us about an appointment, resignation, removal or vacation of office.
- → Filling in this form

 Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by *

	additional insolvency practitioners.		
1	Appointment type		
	Tick to show the nature of the appointment: Administrator Administrative receiver Receiver Manager Nominee Supervisor Liquidator Provisional liquidator	● You can use this continuation page with the following forms: - VAM1, VAM2, VAM3, VAM4, VAM6, VAM7 - CVA1, CVA3, CVA4 - AM02, AM03, AM04, AM05, AM06, AM07, AM08, AM09, AM10, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25 - REC1, REC2, REC3 - LIQ2, LIQ3, LIQ05, LIQ13, LIQ14, WU07, WU15 - COM1, COM2, COM3, COM4	
2	Insolvency practitioner's name		
Full forename(s)	KEVIN		
Surname	COATES		
3	Insolvency practitioner's address		
Building name/number	6		
Street	NEW STREET SQUARE		
Post town	LONDON		
County/Region			
Postcode	E C 4 A 3 B F		
Country			