



FORM No. 600

600

**Notice of appointment of liquidator
Voluntary winding up
(Members or Creditors)**

CHWP000

Please do not
write in
this margin

Pursuant to section 109 of the Insolvency Act 1986

*Please complete
legibly, preferably
in black type, or
bold block lettering*

To the Registrar of Companies
(Address overleaf)

For official use

Company number

--	--	--

08736084

Name of company

* insert full name
of company

Nationwide Wholesale Limited

Nature of Business

Wholesale trade of motor vehicle parts


I / We give notice that I / we have been appointed liquidator(s) of the above company

on 11/05/2017

† delete as
appropriate

The appointment was by Members and Creditors

Type of liquidation Creditors

Name of Liquidator Michaela Daly	
Office holder number 17570	
Address MSD Insolvency, Barn 4, Dunston Business Village, Stafford Road, Stafford, ST18 9AB	
Signature 	Date 18/5/17

Name of Liquidator	
Office holder number	
Address	
Signature	Date

Presenter's name address and
reference (if any) :

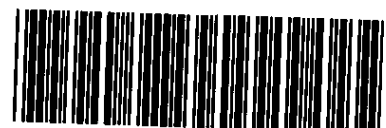
NA0002

Michaela Daly

MSD Insolvency, Barn 4, Dunston
Business Village, Stafford Road, Stafford,
ST18 9AB

For official Use (02/06/17)
General Section

THURSDAY



A34

A670H8Y2

01/06/2017

#66

COMPANIES HOUSE

Time Critical Reference