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



Companies House

WEDNESDAY



A13 *A7H9RD35*
24/10/2018 #169
COMPANIES HOUSE

to

1	Company details	
Company number	0 8 9 7 4 0 2 1	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Design Systematics Ltd	
2	Liquidator's name	
Full forename(s)	Mark	
Surname	Newman	
3	Liquidator's address	
Building name/number	4 Mount Ephraim Road	
Street	Tunbridge Wells	
Post town	Kent	
County/Region		
Postcode	T N 1 1 E E	
Country		
4	Liquidator's email address or telephone number ^①	① You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	recoverysolutions@crowe.co.uk	
Telephone number	01892 700200	
5	Insolvency practitioner number	
Number	0 0 8 7 2 3	

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6	Liquidator's name^①		① Other Liquidator's details Use this section to tell us about another liquidator.
Full forename(s)	Vincent John		
Surname	Green		
7	Liquidator's address^②		② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	4 Mount Ephraim Road		
Street	Tunbridge Wells		
Post town	Kent		
County/Region			
Postcode	T N 1 1 E E		
Country			
8	Liquidator's email address or telephone number^③		③ You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	recoverysolutions@crowe.co.uk		
Telephone number	01892 700200		
9	Insolvency practitioner number		
Number	0 0 9 4 1 6		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	<div> <div>d</div> <div>1</div> <div>d</div> <div>9</div> <div>m</div> <div>1</div> <div>m</div> <div>0</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>1</div> <div>y</div> <div>8</div> </div>		
11	Appointment details		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
12	Type of liquidation		
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors		
13	Sign and date		
Liquidator's signature	Signature <div> <div>X</div> <div>MA.</div> </div>		<div>X</div>
Signature date	<div> <div>d</div> <div>1</div> <div>d</div> <div>9</div> <div>m</div> <div>1</div> <div>m</div> <div>0</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>1</div> <div>y</div> <div>8</div> </div>		

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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

Steven Edwards

Company name

Crowe U.K. LLP

Address

4 Mount Ephraim Road

Tunbridge Wells

Post town

Kent

County/Region

Postcode

T N 1 1 E E

Country

DX

Telephone

01892 700200

**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