In accordance with section 109 of the Insolvency Act 1986

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

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	
Company number	0 9 1 2 4 6 1 8	→ Filling in this form Please complete in typescript or in
Company name in full	DB DENTAL PRACTICE LTD	bold black capitals.
2	Liquidator's name	
Full forename(s)	Katie	
Surname	Young	
3	Liquidator's address	
Building name/number	Kewans Limited	
Street	Suite 1, 3rd Floor	
	18 Market Place	
Post town	Romsey	
County/Region	Hampshire	
Postcode	S O 5 1 8 N A	
Country		
4	Liquidator's email address or telephone number •	You must give an email address or telephone number. All information on this form will appear on the
Email address	katie@kewans.co.uk	
Telephone number	02380170797	public record.
5	Insolvency practitioner number	
Number	1 5 8 7 2	

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6	Liquidator's name ⁰		
Full forename(s)		Other Liquidator's details Use this section to tell us about	
Surname		another liquidator.	
7	Liquidator's address 🛚		
Building name/number		Other Liquidator's details Use this section to tell us about	
Street		another liquidator. Use the continuation page to tell us about more than two liquidators.	
Post town		-	
County/Region		-	
Postcode			
Country			
8	Liquidator's email address or telephone number [©]	You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	$\begin{bmatrix} d \\ 1 \end{bmatrix} \begin{bmatrix} d \\ 6 \end{bmatrix} \begin{bmatrix} m \\ 0 \end{bmatrix} \begin{bmatrix} m \\ 7 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 0 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 1 \end{bmatrix}$		
11	Appointment details		
	The appointment was made by (Tick one) Company Creditors		
12	Type of liquidation		
_	Tick to confirm the liquidation type Members Creditors		
13.	Sign and date		
Liquidator's signature	Signature X		
Signature date	$\begin{bmatrix} d & 2 \end{bmatrix} \begin{bmatrix} d & 2 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 7 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 1 \end{bmatrix}$		

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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 Katie Young **Kewans Limited** Address Suite 1, 3rd Floor 18 Market Place Post town Romsey County/Region Hampshire Postcode S Country DX Telephone 0280170797 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