In accordance with Rule 7.59 of the Insolvency (England & Wales) Rules 2016

WU04

Notice of appointment of liquidator in a winding-up by the court



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

4	Company data il		
	Company details		
Company number	0 9 2 5 4 8 7 2	→ Filling in this form Please complete in typescript or in	
Company name in full	Genesis 2014 (UK) Ltd	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Edward		
Surname	Avery-Gee		
3	Liquidator's address		
Building name/number	Gregs Building		
Street	1 Booth Street		
Post town	Manchester		
County/Region			
Postcode	M 2 4 D U		
Country			
Liquidator's email address or telephone number [©]		You must give an email address or	
Email address	info@cg-recovery.com	telephone number. All information on this form will appear on the	
Telephone number	01613580210	public record.	
5	Liquidator's name [®]	n standard did di arang maga sindi didininkan suna ng parana na kabupa na na na pang sahakilah sa arang maga pa	
Full forename(s)	Daniel	Other Liquidator's details	
Surname	Richardson	Use this section to tell us about another liquidator.	
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Street 1 Booth Street	6	Liquidator's address ®		
1 Booth Street 1 Booth Street	Building name/number	Gregs Building		
Country Postcode M 2 4 D U Country Liquidator's email address or telephone number Email address info@cg-recovery.com Telephone number 01613580210 Statement of appointment I confirm the appointment of the liquidator on Date d 2 d 7 Name of the person, body or court The Secretary of State The Secretary of State Signand date Liquidator's signature Signature Signature Signature Signature Signature A D U D U Pour Machael D W You must give an email address or telephone number telephone number 10 O 1613580210 Statement of appointment I confirm the appointment of the liquidator on The Secretary of State The Secretary of State	Street			
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Present	er information
you do it will h	ve to give any contact information, but if nelp Companies House if there is a query ne contact information you give will be
	thers of the public record.
Contact name Chr	is Brennan
CG Company name	&Co
Address Gregs	Building
1011	
Post town 1 Boot	th Street
County/Region	chester
Postcode	M 2 4 D U
Country	
DX	
Telephone 01613	580210
Checklis	t
We may returi with informat	n forms completed incorrectly or ion missing.
Please make following:	sure you have remembered the
	ny name and number match the n held on the public Register.
☐ You have s	igned 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.

1 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