FORM No. 600

G

CHFP080

Please do not Write in this margin

Please complete legibly preferably

in black type or bold block lettering *Insert full name of company Notice of appointment of liquidator Voluntary winding up (Members or Creditors) 600

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies (Address Overleaf)	For officia	l use	Company number
			09530941
Name of Company			
* APEX SCAFFOLD SERVICES LIMI	ITED		
Nature of Business			
Scaffolders			
I/We give notice that I/We have been ap 3 June 2016	opointed liquidator(s) of the above	e company on	
The appointment was by Members and	Creditors		
Type of liquidation Creditors			
Name of Liquidator Office holder number Address O08744 Findlay Jame Saxon House Saxon Way Cheltenbard) _		
Cheltenham GL52 6QX Date 4 June 2016			<u> </u>
Name of Liquidator Office holder number Address			
Signature		Date	
			
Presenter's name and address and reference (If any) APEXS01 A J Findlay Findlay James	For Official Use General Section	Post roor	m

Time Critical Reference

Cheltenham GL52 6QX

Saxon House Saxon Way

SDAY

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11/06/2016 COMPANIES HOUSE

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