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	1 0 4 2 4 5 2 6	→ Filling in this form	
Company name in full	THE HENGIST VILLAGE BAR AND DINING ROOMS LIMITED	Please complete in typescript or in bold black capitals.	
2	Liquidator's name		
Full forename(s)	Mansoor		
Surname	Mubarik	_	
3	Liquidator's address		
Building name/number	Capital Books (UK) Limited		
Street	66 Earl Street		
Post town	Maidstone	_	
County/Region	Kent		
Postcode	M E 1 4 1 P S		
Country	England	-	
4	Liquidator's email address or telephone number • • • • • • • • • • • • • • • • • • •		
Email address	mmubarik@capital-books.co.uk	telephone number. All information on this form will appear on the	
Telephone number	01622754927	public record.	
5	Insolvency practitioner number		
Number	0 0 9 6 6 7		

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6	Liquidator's name •			
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		
Street		Use this section to tell us about 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	1		
Date	$\begin{bmatrix} 1 & 1 & 9 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix}$			
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	$\begin{bmatrix} d & 2 \end{bmatrix} \begin{bmatrix} d & 1 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 2 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 4 \end{bmatrix}$			

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Presenter information		Important information	
you do it on the fo	ot have to give any contact information, but if will help Companies House if there is a query rm. The contact information you give will be searchers of the public record.	All information on this form will appear on the public record.	
Contact name	Mansoor Mubarik	☑ Where to send	
Company name	Capital Books (UK) Limited	You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:	
Address	66 Earl Street	The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.	
Post town	Maidstone		
County/Region	Kent		
Country	M E 1 4 1 P S England	Further information For further information please see the guidance notes on the website at www.gov.uk/companieshouse	
Telephone	01622754927	or email enquiries@companieshouse.gov.uk	
✓ Checklist		This form is available in an	
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.		alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse	