In accordance with section 109 of the Insolvency Act 1986

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Companies House

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



	Company details	<u> </u>	
Company number	1 0 4 6 0 8 4 8	→ Filling in this form Please complete in typescript or in	
Company name in full	Greek Marina Ltd	bold black capitals.	
2	Liquidator's name		
Full forename(s)	Adam	·	
Surname	Price		
3	Liquidator's address	•	
Building name/number	Craftwork Studios		
Street	1-3 Dufferin Street		
Post town	London		
County/Region			
Postcode	ECIY 8NA		
Country			
4	Liquidator's email address or telephone number • • • • • • • • • • • • • • • • • • •		
Email address		telephone number. All information on this form will appear on the	
Telephone number	020 7377 4370	public record.	
5	Insolvency practitioner number		
Number	25050		
		•	

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<del>6</del>	Liquidator's name <sup>0</sup>		
Full forename(s)	Lane	Other Liquidator's details Use this section to tell us about	
Surname	Bednash	another liquidator.	
7	Liquidator's address @		
Building name/number	Craftwork Studios	Other Liquidator's details	
Street	1-3 Dufferin Street	Use this section to tell us about another liquidator. Use the	
•		continuation page to tell us about more than two liquidators.	
Post town	London		
County/Region			
Postcode	ECIY 8NA		
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	020 7377 4370	public record.	
9	Insolvency practitioner number		
Number	8 8 8 2	•	
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on	·	
Date	1 3 0 7 2 0 2 0		
11	Appointment details		
·. [	The appointment was made by		
	(Tick one).  □ Company		
	☐ Company ☐ Creditors		
12	Type of liquidation	<u> </u>	
·	Tick to confirm the liquidation type		
	□ Members		
, .	☑ Creditors		
13	Sign and date		
	Signature	` .	
Liquidator's signature	X X	· .	
Signature date	<sup>d</sup> 1   <sup>d</sup> 4     <sup>m</sup> 0   <sup>m</sup> 7     <sup>y</sup> 2   <sup>y</sup> 0   <sup>y</sup> 2   <sup>y</sup> 0		
Signature vate	1 4 0 7 2 0 2 0		
. ,			

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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	Adam Price	
Company name	CMB Partners UK Limited	
	•	
Address	Craftwork Studios	
	1-3 Dufferin Street	
Post town	London	
County/Region		
Postcode-	ECIY 8NA	
Country		
DX		
Telephone	020 7377 4370	

## 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