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

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\*A7YVØ900\* A17 08/02/2019 COMPANIES HOUSE

Company details → Filling in this form 4 3 Company number 0 Please complete in typescript or in **SDHM Limited** bold black capitals. Company name in full Liquidator's name Full forename(s) Carolynn Jean Surname **Best** Liquidator's address Building name/number Alma Park, Woodway Lane Street Claybrooke Parva Post town Lutterworth County/Region Leicestershire Postcode E 1 7 5 | F В Country Liquidator's email address or telephone number • • You must give an email address or telephone number. All information Email address cbest@fasimms.com on this form will appear on the public record. Telephone number 01455 555 444 Insolvency practitioner number Number 9 6 8 3

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6	Liquidator's name <sup>©</sup>	
Full forename(s)	Richard Frank	Other Liquidator's details     Use this section to tell us about another liquidator.
Surname	Simms	
7	Liquidator's address @	· · · · · · · · · · · · · · · · · · ·
Building name/number	Alma Park, Woodway Lane	Other Liquidator's details Use this section to tell us about another liquidator. Use the
Street	Claybrooke Parva	
		continuation page to tell us about more than two liquidators.
Post town	Lutterworth	
County/Region	Leicestershire	
Postcode	L E 1 7 5 F B	
Country		
8	Liquidator's email address or telephone number 🖲	You must give an email address or
Email address	rsimms@fasimms.com	telephone number. All information on this form will appear on the public record.
Telephone number	01455 555 444	
9	Insolvency practitioner number	
Number	9 2 5 2	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	0 4 0 2 2 0 1 9	<u> </u>
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 Cocost X	
Signature date	$\begin{bmatrix} 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 &$	

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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	Georgia Flower	
Company name	F A Simms & Partners Limited	
Addres <sub>5</sub>	Alma Park, Woodway Lane	
	Claybrooke Parva	
Post town	Lutterworth	
County/Region	Leicestershire	
Postcode	L E 1 7 5 F B	
Country		
DX		
Telephone	01455 555 444	

#### ✓ 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