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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Co	m	par	nies	Ho	ouse

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

1	Company details					
Company number	1 0 6 1 2 3 2 4	→ Filling in this form Please complete in typescript or in				
Company name in full	Alpha Kilo Solutions Ltd	bold black capitals.				
2	Liquidator's name					
Full forename(s)	Stephen					
urname	Powell					
3	Liquidator's address					
Building name/number	5 Prospect HouseMeridians Cross					
Street	Ocean Way					
Post town	Southampton					
County/Region						
Postcode	S O 1 4 3 T J					
Country						
4	Liquidator's email address or telephone number 🍑	• You must give an email address of				
Email address	Stephen.Powell@btguk.com	telephone number. All informati on this form will appear on the public record.				
Telephone number	023 8033 5888					
5	Insolvency practitioner number					
Number	0 0 9 5 6 1					

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6	Liquidator's name <sup>0</sup>					
Full forename(s)	Julie	Other Liquidator's details Use this continue to tall use about				
Surname	Palmer	Use this section to tell us about another liquidator.				
7	Liquidator's address®					
Building name/number	5 Prospect HouseMeridians Cross	Other Liquidator's details				
Street	Ocean Way	Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.				
Post town	Southampton					
County/Region						
Postcode	S O 1 4 3 T J					
Country						
8	Liquidator's email address or telephone number €	You must give an email address or				
Email address	Julie.Palmer@btguk.com	telephone number. All information on this form will appear on the				
Telephone number	023 8033 5888	public record.				
9	Insolvency practitioner number					
Number	0 0 8 8 3 5					
10	Statement of appointment					
	I confirm the appointment of the liquidator(s) on					
Date	1 7 0 6 2 0 2 1					
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} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $					

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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 Liam Callaghan Company name Begbies Traynor (Central) LLP Address 5 Prospect House, Meridians Crossne Registrar of Companies, Companies House, Ocean Way Post town Southampton County/Regian Postcode S Country

#### Checklist

Telephone

We may return forms completed incorrectly or with information missing.

023 8033 5888

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:

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