In accordance with --- section 109 of the
Insolvency Act 1986

## 600



# Companies House

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

FRIDAY



A14

02/09/2022 #9 COMPANIES HOUSE

1	Con	Company details											
Company number	1	2	2 0	8	0	2	5	4	→ Filling in this form Please complete in typescript or in				
Company name in full	Es	500	ko L	imited	t	bold black capitals.							
						-							
2	Liqu	uid	ato	r's na	me								
Full forename(s)	Peter												
Surname	Harold												
3	Liqu	uid	ato	r's ad	dres	SS							
Building name/number	Sı	uite	6										
Street	1-	7 T	aylo	r Stre	et								
Post town	Bury												
County/Region	Greater Manchester												
Postcode	В	l	_ [9		6	D	T						
Country													
4	Liquidator's email address or telephone number •					• You must give an email address or telephone number. All information on this form will appear on the							
Email address	peter@bespokeinsolvency.co.uk												
Telephone number	01	20	4 23	8 236	 }				public record.				
5	Ins	olv	/enc	y pra	ctiti	one	r nu	mber					
Number	1		) [8	3 1	0								

	Notice of appointment of lique roluntary winding up	idator in a members' or creditors'									
6	iquidator's name <sup>0</sup>										
Full forename(s)			Other Liquidator's details								
Surname			Use this section to tell us about another liquidator.								
7	iquidator'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	iquidator'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 li	quidator(s) on									
Date	d 3 d 0 m 8 y 2	y <sub>0</sub> y <sub>2</sub> y <sub>2</sub>									
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	ign and date										
Liquidator's signature	Signature X	, <b>X</b>									
Signature date	3 d 1 m 8 y2	<sup>y</sup> 0   <sup>y</sup> 2   <sup>y</sup> 2									

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### Presenter information

Checklist

following:

with information missing.

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 Jessica Hodgson
Company name Bespoke Insolvency Solutions
Address Suite 6
1-7 Taylor Street
Post town Bury
County/Region Greater Manchester
Postcode B L 9 6 D T
Country
DX
Telephone 01204 238 236

We may return forms completed incorrectly or

Please make sure you have remembered the

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.

#### **7** 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