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



Companies House

THURSDAY



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02/01/2020

#215

COMPANIES HOUSE

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**1** Company details

Company number 01674043

Company name in full Alcad Limited

→ Filling in this form  
Please complete in typescript or in  
bold black capitals.

**2** Liquidator's name

Full forename(s) Richard

Surname Barker

**3** Liquidator's address

Building name/number 1 More London Place

Street

Post town

County/Region London

Postcode SE12AF

Country

**4** Liquidator's email address or telephone number <sup>①</sup>

Email address

Telephone number 020 7951 2000


① You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

**5** Insolvency practitioner number

Number 17150

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<b>6</b>	<b>Liquidator's name<sup>①</sup></b>		<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)	Samantha		
Surname	Keen		
<b>7</b>	<b>Liquidator's address<sup>②</sup></b>		<b>② Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	1 More London Place		
Street			
Post town			
County/Region	London		
Postcode	S E 1 2 A F		
Country			
<b>8</b>	<b>Liquidator's email address or telephone number<sup>③</sup></b>		<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>
Email address			
Telephone number	020 7951 2000		
<b>9</b>	<b>Insolvency practitioner number</b>		
Number	9 2 5 0		
<b>10</b>	<b>Statement of appointment</b>		
	I confirm the appointment of the liquidator(s) on		
Date	d 1 7 m 1 2 y 2 0 y 1 9		
<b>11</b>	<b>Appointment details</b>		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
<b>12</b>	<b>Type of liquidation</b>		
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors		
<b>13</b>	<b>Sign and date</b>		
Liquidator's signature	Signature X  X		
Signature date	d 0 2 m 0 1 y 2 0 y 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 **Alexandra Southern**

Company name **Ernst & Young LLP**

Address **1 More London Place**

Post town **London**

County/Region

Postcode **S E 1 2 A F**

Country

DX

Telephone **+44 (0) 20 7197 9336**



**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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)**