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



COMPANIES HOUSE

1	Company details		
Company number	0 2 6 4 7 0 0 6	→ Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	Maximvs Limited		
2	Liquidator's name		
Full forename(s)	James		
Surname	Kaye		
3	Liquidator's address		
Building name/number	Suite 4, 2nd Floor		
Street	Aus Bore House		
Post town	19-25 Manchester Road		
County/Region	Wilmslow		
Postcode	SK9 1BQ		
Country			
4	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	01625 540744	public record.	
5	Insolvency practitioner number		
Number	9 3 7 3		

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6	Liquidator's name <sup>©</sup>		
Full forename(s)	Nick	Other Liquidator's details Use this section to tell us about another liquidator.	
Surname	Morgan		
7	Liquidator's address <sup>©</sup>		
Building name/number	Suite 4, 2nd Floor	Other Liquidator's details Use this section to tell us about	
Street	Aus Bore House	another liquidator. Use the	
		continuation page to tell us about more than two liquidators.	
Post town	19-25 Manchester Road		
County/Region	Wilmslow		
Postcode	S K 9 1 B Q		
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	01625 540744	public record.	
9	Insolvency practitioner number		
Number	9 0 7 8		
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	1 2 0 5 ½ 0 ½ 2		
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	X	
Signature date	   d		

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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 Rebecca Dale Company name NTF Corporate Solutions Limited Address Suite 4, 2nd Floor Aus Bore House Post town 19-25 Manchester Road County/Region Wilmslow Postcode S Country DX .Telephone 01625 540744

#### 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