CHFP080

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

Please do not Write in this margin

Please complete legibly preferably in black type or

bold block lettering *Insert full name of company

Pursuant to section 109 of the Insolu	vency Act 1986		
To the Registrar of Companies (Address Overleaf)	For of	ficial use	Company number
Name of Company Flemmings Financial Services Lir	mited		03089244
Nature of Business Financial Services			
I Roderick Graham Butcher give not September 2016	tice that I have been appoil	nted liquidator of	the above company on 20
The appointment was by Creditors Type of liquidation Creditors Volunt	ary Liquidation		
Name of Liquidator Office holder number Address Butcher Wo 79 Caroline Birminghan B3 1UP	Street		
Signature	3	Date 2	0.9,16
Name of Liquidator Office holder number Address		•	•
Signature		Date	
		1	
Butcher Woods Corporate Recovery 79 Caroline Street Birmingham	For Official Use General Section	Post	room

Time Critical Reference



"A5FZA3OR" 21/09/2016 **COMPANIES HOUSE**