CHFP080

FORM No 600

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

Company number

Please do not Write in this margin Pursuant to section 109 of the Insolvency Act 1986

Please complete legibly preferably in black type or bold block lettering *Insert full name

of company

To the Registrar of Companies For official use (Address Overleaf)

05783940

Name of Company

* Simon Johns Fishmonger Limited

Nature of Business

Fishmonger

I/We give notice that I/We have been appointed liquidator(s) of the above company on 26 May, 2015

The appointment was by Members and Creditors

Type of liquidation Creditors

Name of Liquidator

Office holder number

Address

Colin Nicholls 9052

1 Castle Street Worcester **WR1 3AA**

Signature <

Date

26/5/15

Name of Liquidator Office holder number

9274-

Address

9724 1 Castle Street

Andrew Shackleton

Worcester

WR1 3AA

Signature

Date

26-5-15

Presentor's name and address and reference (If any)

00027

Colin Nicholls

Smart Insolvency Solutions Ltd

1 Castle Street

Worcester

WR1 3AA

Time Critical Reference

For Official Use General Section

Post room

28/05/2015 COMPANIES HOUSE

#205