In accordance with section 109 of the Insolvency Act 1986

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



26/05/2020 COMPANIES HOUSE

to

1	Company details	
Company number	1 0 0 8 8 0 7 9	→ Filling in this form Please complete in typescript or in
Company name in full	Clath U.k. Limited	bold black capitals.
2	Liquidator's name	
Full forename(s)	Stephen	
Surname	Powell	
3	Liquidator's address	
Building name/number	8a Carlton Crescent	
Street		
Post town	Southampton	
County/Region		
Postcode	S O 1 5 2 E Z	
Country		
4	Liquidator's email address or telephone number •	• You must give an email address or
Email address	Stephen.Powell@btguk.com	telephone number. All information on this form will appear on the
Telephone number	023 8021 9820	public record.
5	Insolvency practitioner number	
Number	0 0 9 5 6 1	•

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

Surname Palmer Liquidator's address Building name/number Units 1-3 Hilltop Business Park Street Devizes Road Devizes Road Surper Devizes Road Devizes Road County/Region Wiltshire Postcode S P 3 4 U F County/Region Ulie Palmer@btguk.com Telephone number O 23 8021 9820 Insolvency practitioner number I confirm the appointment of the liquidator(s) on Date D To A D D Appointment details The appointment was made by (Tick one) Company Creditors Tigk to confirm the liquidation type Members Sign and date Liquidator's signature Signature Signature Signature Visite this section to relit x a another liquidator's details De this section to relit x a another liquidator (s) to the lix particulation on the liquidation on the lix particulation on the liquidation of liquidation on the lix particulation on the liquidation on the liquidation on the lix particulation on the lix particulation on the lix particulation on the liquidation on the liquidation on the lix particulation on the lix particulation on the liquidation on the lix particulation on the lix particulation on the lix particulation on the liquidation on the lix particulation on the liquidation on the lix particulation on the lix particulation on the liquidation on the lix particulation on the liquidator's on the li	6	Liquidator's name ⁰		
Suriame Palmer Liquidator's address Building name/number Devizes Road Devizes Road Street Devizes Road County/Region Wiltshire Postcode S P 3 4 U F Country/Region Wiltshire Postcode S D B B B B B B B B B B B B B B B B B B	Full forename(s)	Julie	Other Liquidator's details Use this section to tell us about another liquidator.	
Building name/number Devizes Road	Surname	Palmer		
Street	7	Liquidator's address [©]		
Street Devizes Road another injudiator use to religious to the continuation page to tell use more than two liquidators. Salisbury Salisbury	Building name/number	Units 1-3 Hilltop Business Park		
Post town Salisbury County/Region Wiltshire Postcode S P 3 4 U F Country 8	Street	Devizes Road	another liquidator. Use the	
Country/Region Wiltshire Postcode S P 3 4 U F Country 8 Liquidator's email address or telephone number P Email address Julie.Palmer@btguk.com Telephone number 023 8021 9820 9 Insolvency practitioner number Number 0 0 8 8 3 5 10 Statement of appointment I confirm the appointment of the liquidator(s) on Date 0 7 0 4 2 0 2 0 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 X X				
Postcode SP3 4 UF Country Liquidator's email address or telephone number Email address Julie.Palmer@btguk.com Telephone number O23 8021 9820 Insolvency practitioner number Number O 0 8 8 3 5 Statement of appointment I confirm the appointment of the liquidator(s) on Date O 7 0 4 2 0 2 0 Appointment details The appointment was made by (Tick one) Company Creditors Type of liquidation Tick to confirm the liquidation type Members Creditors Sign and date Liquidator's signature Sign and date Liquidator's signature Members Liquidator's signature Supressign and signature Signature Supressign and signature Signature Members Liquidator's signature Supressign and signature Signature A UF O You must give an email addretelephone number O You must give an email addretelephone number Itelephone number Itelephone number De You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number Itelephone number Itelephone number Itelephone number O You must give an email addretelephone Itelephone number Itelephone number O You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number O You must give an email addretelephone number Itelephone number Itelephone number O You must give an email addretelephone number Itelephone number Itelephone number Itelephone number O You must give an email addretelephone number Itelephone number Itelephone number Itelephone number O D & S & S & S & S & S & S & S & S & S &	Post town	Salisbury		
Country 8	County/Region	Wiltshire		
Email address Julie.Palmer@btguk.com Telephone number 023 8021 9820 9	Postcode	SP3 4UF		
Email address Julie.Palmer@btguk.com Telephone number 023 8021 9820 9	Country			
Julie. Palmer@btguk.com Telephone number 023 8021 9820 Insolvency practitioner number Number 0 0 8 8 3 5 5 10 Statement of appointment I confirm the appointment of the liquidator(s) on Date	8	Liquidator's email address or telephone number [©]	You must give an email address or	
Telephone number O23 8021 9820 Public record.	Email address	Julie.Palmer@btguk.com	telephone number. All information on this form will appear on the	
Number O	Telephone number	023 8021 9820		
Statement of appointment confirm the appointment of the liquidator(s) on Date	9	Insolvency practitioner number		
I confirm the appointment of the liquidator(s) on Date	Number	0 0 8 8 3 5		
Date O O O O O O O O O	10	Statement of appointment		
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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	Stephen Powell	
Company name	Begbies Traynor (Central) LLP	
Address	8a Carlton Crescent	
Post town	Southampton	
County/Region		
Postcode	S O 1 5 2 E Z	
Country		
DX		
Telephone	023 8021 9820	

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