In accordance with section 109 of the insolvency Act 1986

## 600



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



\*A846JYV7\* A09 26/04/2019 COMPANIES HOUSE

#57

Company details		
0 9 2 0 1 1 5 4	→ Filling in this form	
VAPE STORE GROUP LIMITED	Please complete in typescript or in bold black capitals.	
Liquidator's name	<u>'</u>	
ANTHONY		
SARGEANT		
Liquidator's address	·	
108		
RANBY ROAD		
SHEFFIELD		
S 1 1 7 A L		
Liquidator's email address or telephone number •	You must give an email address or	
tony@ajsargeant.co.uk	telephone number. All information on this form will appear on the public record.	
Insolvency practitioner number		
9 6 5 9		
	VAPE STORE GROUP LIMITED  Liquidator's name  ANTHONY  SARGEANT  Liquidator's address  108  RANBY ROAD  SHEFFIELD  S 1 1 7 A L  Liquidator's email address or telephone number  tony@ajsargeant.co.uk  Insolvency practitioner number	

600

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6	Liquidator's name <sup>©</sup>		
Full forename(s)		Other Liquidator's details Use this section to tell us about	
Surname		another liquidator.	
7	Liquidator's address ®	, , , , , , , , , , , , , , , , , , , ,	
Building name/number		Other Liquidator's details	
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
Post town		-	
County/Region		-	
Postcode			
Country		-	
8 Liquidator's email address or telephone number   ● You must give		You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d2   d9   m0   m3   y2   y0   y1   y9		
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		
iquidator's signature.	× Anfangeon ×		