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

For further information, please refer to our guidance at www.gov.uk/companieshouse

Company number 0 Company name in full CH 2 Liq Full forename(s) KII Surname BC 3 Liq	mpany details 6 5 5 6 1 2 0 HILVERS CONSULTING LIMITED quidator's name ERAN DURNE	Filling in this form Please complete in typescript or in bold black capitals.	
2 Liq Full forename(s) KII Surname BC 3 Liq	juidator's name ERAN	bold black capitals.	
Full forename(s) KII Surname BC Liq	ERAN		
Full forename(s) KII Surname BC Liq	ERAN		
Surname BC			
3 Liq	OURNE		
	quidator's address		
Building name/number 5!	MERCIA BUSINESS VILLAGE		
Street TO	ORWOOD CLOSE		
		·	
Post town Co	OVENTRY		
County/Region W	EST MIDLANDS		
Postcode C	V 4 8 H X		
	NITED KINGDOM		
4 Lie	Liquidator's email address or telephone number O You must give an email		
Email address in	nfo@cromwellinsolvency.co.uk	telephone number. All informatio on this form will appear on the	
Telephone number 0	800 061 4002	public record.	
5 Ir	nsolvency practitioner number		
Number 1	9 0 1 2		

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5	Liquidator's name ⁰	A Asternational description of the state of	
full forename(s)		Other Liquidator's details Use this section to tell us about	
ourname		another liquidator.	
7	Liquidator's address [©]		
Building name/number		Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.	
Street			
Post town			
County/Region			
Postcode			
Country			
8	Liquidator's email address or telephone number [©]	You must give an email address of telephone number. All information	
Email address		on this form will appear on the public record.	
Telephone number		pupiic record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	d 3 d 1		
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	×	
Signature date	$\begin{bmatrix} d & 0 & \end{bmatrix} \begin{bmatrix} d & 1 & \end{bmatrix} \begin{bmatrix} m & 1 & \end{bmatrix} \begin{bmatrix} m & 1 & \end{bmatrix} \begin{bmatrix} y & 2 & y & 0 \end{bmatrix} \begin{bmatrix} y & 2 & y & 2 \end{bmatrix} \begin{bmatrix} y & 2 & y & 2 \end{bmatrix}$		

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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	KIERAN BOURNE	
Company name	CROMWELL INSOLVENCY LIMITED	
Address	5 MERCIA BUSINESS VILLAGE	
TORWOOD CLOSE		
Post town Co	OVENTRY	
County/Region	WEST MIDLANDS	
Postcode	C V 4 8 H X	
Country U	NITED KINGDOM	
DX		
Telephone O	800 061 4002	

✓ 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.

i 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