In accordance with section 109 of the Insolvency Act 1986

## 600

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



'UESDAY



A25

26/11/2019 COMPANIES HOUSE #276

|                      |   | COMPANIES HOUSE   |
|----------------------|---|---|
| 1                    | Company details   |   |
| Company number       | 0 7 0 5 1 6 0 1   | → Filling in this form Please complete in typescript or in        |
| Company name in full | Freebreak Limited   | bold black capitals.  |
|                      |   |   |
| 2                    | Liquidator's name   |   |
| Full forename(s)     | Nicholas  |   |
| Surname              | Parsk   |   |
| 3                    | Liquidator's address  |   |
| Building name/number | Gladstone House   |   |
| Street               | 77-79 High Street   |   |
|                      |   |   |
| Post town            | Egham   |   |
| County/Region        | Surrey  |   |
| Postcode             | T W 2 0 9 H Y   |   |
| Country              |   |   |
| 4                    | Liquidator's email address or telephone number   Output  Description: | ● You must give an email address or                               |
| mail address         |   | telephone number. All information on this form will appear on the |
| elephone number      |   | public record.  |
| 5                    | Insolvency practitioner number  |   |
| Number               | 1 9 7 7 0   |   |

### 600

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

| 6                       | Liqu     | idat          | or's  | nam   | e     | •             |      |      |       |      | ·   |              |    |   |   |
|-------------------------|----------|---------------|-------|-------|-------|---------------|------|------|-------|------|---|--------------|----|---|---|
| Full forename(s)        | Matthew  |               |       |       |       |               |      |      |       |      | Other Liquidator's details     Use this section to tell us     about another liquidator |              |    |   |   |
| Surname                 | Wa       | ghor          | n     |       |       |               |      |      |       |      |   |              |    |   | <br>:   |
| 7                       | Liqu     | idat          | or's  | addr  | ess   | •             |      |      |       |      |   |              |    |   | <br>  |
| Building<br>name/number | 92       |               |       |       |       |               |      |      |       |      |   |              |    |   | <br>Other Liquidator's details  |
| Street                  | Loi      | ndon          | Stree | et    |       |               |      |      |       |      |   |              |    |   | Use this section to tell us about another liquidator. Use the                             |
|                         |          | <u> </u>      |       |       |       |               |      |      |       |      |   | _            |    |   | continuation page to tell us about more than two liquidators.                             |
| Post town               | Rea      | ading         |       |       |       |               |      |      |       |      |   |              |    | - |   |
| County/Region           | Bei      | kshir         | e     |       |       |               |      |      |       |      |   |              |    |   |   |
| Postcode                | R        | G             | 1     |       | 4     | S             |      |      |       |      |   |              |    |   | <br>  |
| Country                 |          | 4             | ·     |       | _     |               |      |      |       |      |   | <del>.</del> |    |   |   |
| 8                       | Liqui    | idate         | or's  | emai  | il ad | ldre          | ss c | r te | elep  | ho   | ne n  | umk          | er | • |   |
| Email address           | ma       | tthev         | v.wa  | ghorn | ı@wi  | ilkins        | keni | ned  | /.con | n    |   |              |    |   | <br>You must give an email address or telephone number. All information on this form will |
| Telephone number        | 011      | 189 5         | 1213  | 1     | _     | <del>,.</del> |      |      |       |      | <u> </u>  | <u>.</u>     |    |   | <br>appear on the public record.  |
| 9                       | Insol    | ven           | су рі | racti | tion  | er n          | um   | bei  | •     |      |   |              | _  |   | <br>  |
| Number                  | 0        | 0             | 9     | 4     | 3     | 2             | [    |      |       |      |   |              |    |   |   |
| 10                      | State    | mei           | nt of | арр   | oin   | tme           | nt   |      |       |      |   |              |    |   | <br>  |
|                         |          |               |       |       |       |               |      |      |       |      |   |              |    |   |   |
|                         | l con    | firm t        | he a  | poin  | tmei  | nt of         | the  | liqu | idato | r(s) | on  |              |    |   |   |
| Date                    | 1        | 9             |       | 1     | 1     |               | 2    |      | ) :   | L    | 9   |              |    | _ | <br>  |
| 11                      | Appo     | ointr         | nen   | det   | ails  |               |      |      |       |      |   |              |    |   | <br>  |
|                         | (Tick of | omp<br>Credit | ors   | t was | mad   | le bv         |      |      |       |      |   |              |    |   |   |
|                         | Р        |               |       |       |       | ,             |      |      |       |      |   |              |    |   | <br>  |

| 12                     | Type of liquidation                       |   |
|------------------------|---|---|
|                        | Members  Creditors                        |   |
|                        | ।<br>Tick to confirm the liquidation type | l |
| 13                     | Sign and date                             |   |
| Liquidator's signature | x x                                       |   |
| Signature date         | Signature 2 5 1 1 2 0 1 9                 |   |
|                        |   |   |

#### 600

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

| Presenter information   |                   |                 |                |                |                  |       |        |      |  |  |
|---|-------------------|-----------------|----------------|----------------|------------------|-------|--------|------|--|--|
| You do not ha<br>you do it will h<br>on the form. T<br>visible to searc | nelp Co<br>he cor | ompa<br>ntact i | nies<br>inforr | House<br>natio | e if th<br>n you | ere i | s a qı | ıery |  |  |
| Matthew Joh   | n Wa              | ghorn           |                |                |                  |       |        |      |  |  |
| Wilkins Kenn  | edy               |                 |                |                |                  |       |        |      |  |  |
|   |                   |                 |                |                |                  | •     |        |      |  |  |
| 92 London S   | treet             |                 |                |                |                  |       |        |      |  |  |
| Berkshire   | Berkshire         |                 |                |                |                  |       |        |      |  |  |
|   |                   |                 |                |                |                  |       |        |      |  |  |
| Reading   |                   |                 |                |                |                  |       |        |      |  |  |
| Berkshire   |                   |                 | _              |                |                  |       |        |      |  |  |
| Postcode  | R                 | G               | 1              |                | 4                | S     | J      |      |  |  |
|   |                   |                 |                |                |                  |       |        |      |  |  |
| DX  |                   |                 |                |                |                  | -     |        |      |  |  |
|   |                   |                 |                |                |                  |       | _      |      |  |  |
| ✓ Checkli   | st                |                 |                |                |                  |       |        |      |  |  |
| We may retu   | rn for            | ms c            | omp            | ieted          | ince             | orrec | tlv o  |      |  |  |

Please make sure you have remembered the

The company name and number match the information held on the public Register.
 You have signed and dated the form.

with information missing.

following:

#### 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