

600

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



Companies House

SATURDAY



A10      \*A8ZCAL6W\*      22/02/2020      #258  
COMPANIES HOUSE

<b>1</b>	<b>Company details</b>	
Company number	0 8 9 3 6 0 1 9	<b>→ Filling in this form</b> Please complete in typescript or in bold black capitals.
Company name in full	TJ Psychology Services Limited	
<b>2</b>	<b>Liquidator's name</b>	
Full forename(s)	Richard	
Surname	Hunt	
<b>3</b>	<b>Liquidator's address</b>	
Building name/number	9 Ensign House	
Street	Admirals Way	
Post town	Marsh Wall	
County/Region	London	
Postcode	E 1 4      9 X Q	
Country		
<b>4</b>	<b>Liquidator's email address or telephone number <sup>①</sup></b>	<b>①</b> You must give an email address or telephone number. All information on this form will appear on the public record.
Email address		
Telephone number	020 7538 2222	
<b>5</b>	<b>Insolvency practitioner number</b>	
Number	2 1 7 7 2	

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

## 6 Liquidator's name<sup>①</sup>

Full forename(s)

Surname

### ① Other Liquidator's details

Use this section to tell us about another liquidator.

## 7 Liquidator's address<sup>②</sup>

Building name/number

Street

Post town

County/Region

Postcode

Country

### ② 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.

## 8 Liquidator's email address or telephone number<sup>③</sup>

Email address

Telephone number

③ You must give an email address or telephone number. All information on this form will appear on the public record.

## 9 Insolvency practitioner number

Number

## 10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date

<sup>d</sup> 1 <sup>d</sup> 1 <sup>m</sup> 0 <sup>y</sup> 2 <sup>y</sup> 2 <sup>y</sup> 0 <sup>y</sup> 0

## 11 Appointment details

The appointment was made by  
(Tick one)

☒ Company

☐ Creditors

## 12 Type of liquidation

Tick to confirm the liquidation type

☒ Members

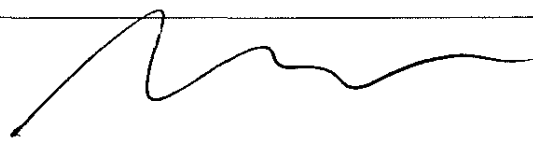
☐ Creditors

## 13 Sign and date

Liquidator's signature

Signature

X



X

Signature date

<sup>d</sup> 2 <sup>d</sup> 1 <sup>m</sup> 0 <sup>y</sup> 2 <sup>y</sup> 0 <sup>y</sup> 2 <sup>y</sup> 0

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

**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

Company name

S F P

Address

9 Ensign House

Admirals Way

Post town

Marsh Wall

County/Region

London

Postcode

E 1 4 9 X Q

Country

DX

Telephone

020 7538 2222

**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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)