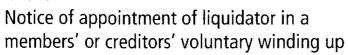
In accordance with section 109 of the Insolvency Act 1986

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			24/03/2020 #6 COMPANIES HOUSE
1	Company details		
Company number	0 8 9 6 1 1 1 0		→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	ACCORDO LIMITED		
2	Liquidator's name		
Full forename(s)	PHILLIP ANTHONY ROBERTS		
Surname			
3	Liquidator's address		
Building name/number	STERLING FORD		
Street	CENTURION COURT		
	83 CAMP ROAD		
Post town	ST ALBANS		
County/Region	HERTFORDSHIRE		
Postcode	A L 1 5 J N		
Country	UNITED KINGDOM		
Liquidator's email address or telephone number •			• You must give an email address or
Email address	office@sterlingford.co.uk		telephone number. All information on this form will appear on the public record.
Telephone number	01727 811 161		
5	Insolvency practitioner number		
Number	6 0 5 5		

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

6	Liquidator's name <sup>0</sup>	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address o	
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 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	<u></u>
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	1
Date	$\begin{bmatrix} d & 0 \end{bmatrix} \begin{bmatrix} d $	
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	A Contract of the Contract of	<
Signature date	d 0   d 9   m 0   m 3   v 2   v 0   v 2   v 0	

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

Pre	senter information
you do it on the fo	ot have to give any contact information, but if will help Companies House if there is a query orm. The contact information you give will be searchers of the public record.
Contact name	FEDAI EREN
Company nam	STERLING FORD
Address	CENTURION COURT
83 CAN	IP ROAD
Post town	ST ALBANS
County/Region	HERTS
Postcode	A L 1 5 J N
Country	UNITED KINGDOM
DX	
Telephone	01727 811 161
<b>√</b> Che	ecklist
	return forms completed incorrectly or ormation missing.
Please followi	make sure you have remembered the ng:
	company name and number match the rmation 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.

## *t* 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