

600

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



Companies House

SATURDAY



\*A8FWEWAJ\*

A17 12/10/2019 #144

COMPANIES HOUSE

1 Company details

Company number	1   0   7   4   4   3   0   4
Company name in full	STREAM MARINE TRAINING (NORTH WEST) LIMITED

→ Filling in this form  
Please complete in typescript or in bold black capitals.

2 Liquidator's name

Full forename(s)	JULIE
Surname	TAIT

3 Liquidator's address

Building name/number	GRANT THORNTON UK LLP
Street	LEVEL 8 110 QUEEN STREET
Post town	GLASGOW
County/Region	
Postcode	G   1     3   B   X
Country	

4 Liquidator's email address or telephone number ①

Email address	JULIE.TAIT@UK.GT.COM
Telephone number	0131 229 9181

① You must give an email address or telephone number. All information on this form will appear on the public record.

5 Insolvency practitioner number

Number	2   3   1   1   0
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**6 Liquidator's name<sup>1</sup>**

Full forename(s) STUART  
Surname PRESTON

<sup>1</sup> Other Liquidator's details  
Use this section to tell us about another liquidator.

**7 Liquidator's address<sup>2</sup>**

Building name/number GRANT THORNTON UK LLP  
Street LEVEL 8  
110 QUEEN STREET  
Post town GLASGOW  
County/Region  
Postcode G 1 3 B X  
Country

<sup>2</sup> 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 STUART.PRESTON@UK.GT.COM  
Telephone number 0141 223 0000

<sup>3</sup> 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 1 3 4 3 0

**10 Statement of appointment**

I confirm the appointment of the liquidator(s) on  
Date d<sup>0</sup> d<sup>8</sup> m<sup>1</sup> m<sup>0</sup> y<sup>2</sup> y<sup>0</sup> y<sup>1</sup> y<sup>9</sup>

**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 S. Fair X  
Signature date d<sup>1</sup> d<sup>1</sup> m<sup>1</sup> m<sup>0</sup> y<sup>2</sup> y<sup>0</sup> y<sup>1</sup> y<sup>9</sup>

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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 LUCY DALE

Company name GRANT THORNTON UK LLP

Address LEVEL 8

110 QUEEN STREET

Post town GLASGOW

County/Region

Postcode

G 1 3 B X

Country

DX

Telephone 0141 223 0820

 **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)

# 600 - continuation page

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

<b>1 Company details</b>	
Company number	<input type="text"/>
Company name in full	<input type="text"/>

<b>2 Liquidator's name</b>	
Full forename(s)	<input type="text"/>
Surname	<input type="text"/>

<b>3 Liquidator's address</b>	
Building name/number	<input type="text"/>
Street	<input type="text"/>
Post town	<input type="text"/>
County/Region	<input type="text"/>
Postcode	<input type="text"/>
Country	<input type="text"/>

<b>4 Liquidator's email address or telephone number</b> <sup>1</sup>	
Email address	<input type="text"/>
Telephone number	<input type="text"/>

<sup>1</sup> You must give an email address or telephone number. All information on this form will appear on the public record.

<b>5 Insolvency practitioner number</b>	
Insolvency practitioner number	<input type="text"/>