In accordance with section 109 of the Insolvency Act 1986

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# Companies House

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

**COMPANIES HOUSE** Company details Filling in this form Company number 6 Please complete in typescript or in Company name in full EC3 Consulting Limited bold black capitals. Liquidator's name Full forename(s) Phil Clark Surname Liquidator's address 3 Building name/number C/o Clark Business Recovery Limited Street **8 Fusion Court** Aberford Road, Garforth Post town Leeds County/Region Postcode S 2 5 G Country Liquidator's email address or telephone number • • You must give an email address or telephone number. All information **Email address** phil@clarkbr.co.uk on this form will appear on the public record. Telephone number 01132438617 Insolvency practitioner number Number 3 | 5 | 3 |

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

Surname C  7 L  Building name/number C  Street 8	Dave Clark  iquidator's address   c/o Clark Business Recovery Limited	Other Liquidator's details Use this section to tell us about another liquidator.
7 L Building name/number c Street 8	iquidator's address <sup>©</sup>	• • • • • • • • • • • • • • • • • • •
Building name/number of Street		
Street	c/o Clark Business Recovery Limited	
(-		Other Liquidator's details
	8 Fusion Court	Use this section to tell us about another liquidator. Use the
	Aberford Road, Garforth	continuation page to tell us about more than two liquidators.
Post town L	Leeds	
County/Region		
Postcode	L S 2 5 2 G H	
Country		
8 Li	iquidator's email address or telephone number 🛚	You must give an email address or
Email address in	info@clarkbr.co.uk	telephone number. All information on this form will appear on the
Telephone number	01132438617	public record.
9	Insolvency practitioner number	
Number	9 5 6 5	
10 S	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date d	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
11 A	Appointment details	
	The appointment was made by	
	(Tick one)  ☑ Company	
	□ Creditors	
12 T	ype of liquidation	
	Tick to confirm the liquidation type	
	☑ Members	
	□ Creditors	
13 S	ign and date	·
Liquidator 3 Signature	Signature	
	×//	×
Signature date	2 1 1 2 20 2	

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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	Phil Clark	
Company name Clark Business Recovery Limited		
Address	8 Fusion Court	
Aberford Road		
Garforth		
Post town	Leeds	
County/Region		
Postcode	L S 2 5 2 G H	
Country		
DX		
Telephone	01132438617	

# ✓ 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 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