

G

CHFP080

FORM No. 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

600

Please do not
Write in this margin

Please complete
legibly
preferably
in black type or
bold block
lettering

*Insert full name
of company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies
(Address Overleaf)

For official use

Company number

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03179723

Name of Company

* A & L Insurance Services Plc


Nature of Business

Other business activities

I/We give notice that I/We have been appointed liquidator(s) of the above company on
11 March, 2009

The appointment was by Members

Type of liquidation Members

Name of Liquidator	Kevin Goldfarb
Office holder number	8858
Address	Tavistock House South Tavistock Square London WC1H 9LG
Signature	
Date	11/03/2009

Name of Liquidator	
Office holder number	
Address	
Signature	
Date	

Presenter's name and address and
reference (If any):

ALINS01
Kevin Goldfarb
Griffins
Tavistock House South
Tavistock Square
London
WC1H 9LG

Time Critical Reference

For Official Use
General Se

Post room

WEDNESDAY



A47 18/03/2009 268

COMPANIES HOUSE