

G

CHFP080

FORM No 600

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

600

Please do not
Write in this margin

Pursuant to section 109 of the Insolvency Act 1986

Please complete
Legibly preferably

To the Registrar of Companies
(Address Overleaf)

For official use

Company number

In black type or
bold block
lettering

*Insert full name
of company

| | | |
|--|--|--|
| | | |
|--|--|--|

| |
|----------|
| 07062326 |
|----------|

Name of Company

| |
|---|
| * Mast Clothing Ltd t/a Crave Maternity |
|---|

Nature of Business

| |
|-------------------------|
| Retail sale of clothing |
|-------------------------|

I/We give notice that I/We have been appointed liquidator(s) of the above company on 13 November 2013

The appointment was by Members and confirmed by Creditors

Type of liquidation Creditors' Voluntary Liquidation

| | |
|----------------------|--|
| Name of Liquidator | Mark Grahame Tailby |
| Office holder number | 9115 |
| Address | 39 Castle Street Leicester LE1 5WN |
| Signature | Date 13 November 2013 |

| | |
|----------------------|--------------------------|
| Name of Liquidator | |
| Office holder number | |
| Address | |
| Signature | Date 13 November 2013 |

Presenter's name and address and
reference (If any)
002173
Mark Grahame Tailby
CBA
39 Castle Street
Leicester
LE1 5WN

Time Critical Reference

For Official Use
General Section

THURSDAY



A11 14/11/2013 #81
COMPANIES HOUSE