

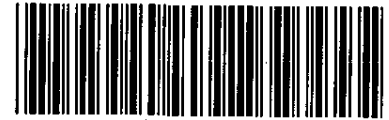
600

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



Companies House

WEDNESDAY



\*A8INXMMB\*

A08

20/11/2019

#65

COMPANIES HOUSE

**1** Company details

Company number 0 7 4 4 6 7 4 9

Company name in full 07446749 Ltd formerly Blippar.com Ltd

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

**2** Liquidator's name

Full forename(s) Paul

Surname Appleton

**3** Liquidator's address

Building name/number 26 - 28 Bedford Row

Street

Post town London

County/Region

Postcode W C 1 R 4 H E

Country

**4** Liquidator's email address or telephone number <sup>①</sup>

Email address

Telephone number 020 7400 7900

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 8 8 8 3

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**6** Liquidator's name <sup>1</sup>

Full forename(s) Paul  
Surname Cooper

<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 26 - 28 Bedford Row  
Street  
Post town London  
County/Region  
Postcode WC 1 R 4 H E  
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  
Telephone number 020 7400 7900

<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 5 4 5 2

**10** Statement of appointment

I confirm the appointment of the liquidator(s) on  
Date 1 2 1 1 2 0 1 9


**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  X  
Signature date 1 4 1 1 2 0 1 9

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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 **Adam Shama**

Company name **David Rubin & Partners**

Address

**26 - 28 Bedford Row**

Post town **London**

County/Region

Postcode **W C 1 R 4 H E**

Country

DX **London/Chancery Lane**

Telephone **020 7400 7900**

 **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)**