In accordance with Rule 3.54 of the Insolvency (England & Wales) Rules 2016 & paragraph 78(5)(b) of Schedule B1 to the Insolvency Act 1986.

# **AM19**

# Notice of extension of period of administration



For further information, please refer to our guidance at www.gov.uk/companieshouse

| 1                    | Con | npar     | ny d  | etai  | ls       |       |   |   |  |  |  |                      |      |                                                             |
|----------------------|-----|----------|-------|-------|----------|-------|---|---|--|--|--|----------------------|------|-------------------------------------------------------------|
| Company number       |     |          |       |       |          |       |   | _ |  |  |  |                      |      | → Filling in this form  Please complete in typescript or in |
| Company name in full |     |          |       |       |          |       |   |   |  |  |  | bold black capitals. |      |                                                             |
|                      |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
| 2                    | Cou | rt d     | etai  | ls    |          |       |   |   |  |  |  |                      |      |                                                             |
| Court name           |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
|                      |     |          |       |       |          |       |   |   |  |  |  |                      | <br> | -                                                           |
| Court number         |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
| 3                    | Adn | ninis    | strat | tor's | nan      | ne    |   |   |  |  |  |                      |      | _                                                           |
| Full forename(s)     |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
| Surname              |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
| 4                    | Adn | ninis    | strat | tor's | ado      | lress | • |   |  |  |  |                      |      |                                                             |
| Building name/number |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
| Street               |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
|                      |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
| Post town            |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
| County/Region        |     |          |       |       |          |       |   |   |  |  |  |                      |      | _                                                           |
| Postcode             |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
| Country              |     | <u> </u> |       |       | <u>-</u> |       | · |   |  |  |  |                      |      | _                                                           |
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|                      |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |
|                      |     |          |       |       |          |       |   |   |  |  |  |                      |      |                                                             |

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Notice of extension of period of administration

| 5                    | Administrator's name •                                        |                                                                             |  |  |
|----------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|--|--|
| Full forename(s)     |                                                               | Other administrator Use this section to tell us abou another administrator. |  |  |
| Surname              |                                                               |                                                                             |  |  |
| 6                    | Administrator's address o                                     |                                                                             |  |  |
| Building name/number |                                                               | Other administrator Use this section to tell us abou                        |  |  |
| Street               |                                                               | another administrator.                                                      |  |  |
| Post town            |                                                               |                                                                             |  |  |
| County/Region        |                                                               |                                                                             |  |  |
| Postcode             |                                                               |                                                                             |  |  |
| Country              |                                                               |                                                                             |  |  |
| 7                    | Administration extended until                                 |                                                                             |  |  |
| Date                 | d         m         m         y         y         y         y |                                                                             |  |  |
| 8                    | Extension of period of administration                         |                                                                             |  |  |
|                      | The period of administration was extended:                    |                                                                             |  |  |
|                      | By order of the court                                         |                                                                             |  |  |
|                      | ☐ With the consent of the company's creditors                 |                                                                             |  |  |
| 9                    | Sign and date                                                 | 1                                                                           |  |  |
| Signature            | Signature X                                                   |                                                                             |  |  |
| Signature date       | d                                                             |                                                                             |  |  |

#### **AM19**

Notice of extension of period of administration

#### 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.

| ontact name  |
|--------------|
| ompany name  |
|              |
| ddress       |
|              |
|              |
| ost town     |
| ounty/Region |
| ostcode      |
| ountry       |
| х            |
| elephone     |

## 1

#### 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.

I

### 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.

## **i** 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

# Continuation page Name and address of insolvency practitioner

- What this form is for
  Use this continuation page to
  tell us about another insolvency
  practitioner where more than
  2 are already jointly appointed.
  Attach this to the relevant form.
  Use extra copies to tell us of
- What this form is NOT for You can't use this continuation page to tell us about an appointment, resignation, removal or vacation of office.
- → Filling in this form
  Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by \*

|                      | additional insolvency practitioners.                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                    | Appointment type                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                      | Tick to show the nature of the appointment:  Administrator  Administrative receiver  Receiver  Manager  Nominee  Supervisor  Liquidator  Provisional liquidator | <ul> <li>You can use this continuation page with the following forms:</li> <li>VAM1, VAM2, VAM3, VAM4, VAM6, VAM7</li> <li>CVA1, CVA3, CVA4</li> <li>AM02, AM03, AM04, AM05, AM06, AM07, AM08, AM09, AM10, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25</li> <li>REC1, REC2, REC3</li> <li>LIQ02, LIQ03, LIQ05, LIQ13, LIQ14, WU07, WU15</li> <li>COM1, COM2, COM3, COM4</li> <li>NDISC</li> </ul> |
| 2                    | Insolvency practitioner's name                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Full forename(s)     |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Surname              |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 3                    | Insolvency practitioner's address                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Building name/number |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Street               |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Post town            |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| County/Region        |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Postcode             |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Country              |                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                  |
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