In accordance with Rule 3.60 of the Insolvency (England & Wales) Rules 2016 & Paragraph 83(3) of Schedule B1 to the Insolvency Act 1986.

AM22

Notice of move from administration to creditors' voluntary liquidation



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

| 1 | Compa | ny de | etail | s | | | | | | |
|----------------------|---------|-------|-------|-----|-------|-------|------|------|------|--|
| Company number | | | | | | | | | | → Filling in this form Please complete in typescript or in |
| Company name in full | | | | | | | | | | bold black capitals. |
| 2 | Court d | etail | ls | | | | | | | |
| Court name | | | | | | | | | | _ |
| | | | | | | | | | | _ |
| Court case number | | | | | | | | | | |
| 3 | Admini | strat | or's | nar | ne | | | | | |
| Full forename(s) | | | | | | | | | | _ |
| Surname | Wilkins | on | | | | | | | | |
| 4 | Admini | strat | or's | ado | lress | | | | | |
| Building name/number | | | | | | | | | | |
| Street | | | | | | | | | | |
| | | | | | | | | | | |
| Post town | | | | | | | | | | _ |
| County/Region | | | | | | _ | | | | |
| Postcode | | | | | | | | | | _ |
| Country | | | | | | | | | | |
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Notice of move from administration to creditors' voluntary liquidation

| 5 | Administrator's name • | |
|--------------------------------|---|--|
| Full forename(s) | | • Other administrator |
| Surname | Hussain | Use this section to tell us about another administrator. |
| 6 | Administrator's address @ | |
| Building name/number | | ② Other administrator |
| Street | | Use this section to tell us about another administrator. |
| | | _ |
| Post town | | |
| County/Region | | |
| Postcode | | |
| Country | | |
| 7 | Appointor/applicant's name | |
| | Give the name of the person who made the appointment or the | |
| | administration application. | _ |
| Full forename(s) | | _ |
| Surname | | |
| 8 | Proposed liquidator's name | - |
| Full forename(s) | | _ |
| Surname | | |
| Insolvency practitioner number | | |
| 9 | Proposed liquidator's address | |
| Building name/number | | _ |
| Street | | _ |
| | | _ |
| Post town | | _ |
| County/Region | | |
| Postcode | | _ |
| Country | | |
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AM22

Notice of move from administration to creditors' voluntary liquidation

| 10 | Proposed liquidator's name • | |
|----------------------------------|---|---|
| Full forename(s) | | • Other liquidator |
| Surname | | Use this section to tell us abou another liquidator. |
| nsolvency practitioner number | | |
| 11 | Proposed liquidator's address® | |
| Building name/number | | 3 Other liquidator |
| treet | | Use this section to tell us about another liquidator. |
| ost town | | |
| County/Region | | |
| Postcode | | |
| Country | | |
| 12 | Period of progress report | · |
| From date | d m m y y y y | |
| Го date | d | |
| 13 | Final progress report | |
| _ | ☐ I have attached a copy of the final progress report. | |
| 14 | Sign and date | |
| Administrator's signature | Signature X | X |
| Signature date | d d m m y y y | |

Notice of move from administration to creditors' voluntary liquidation

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 | | | | |
|---------------|--|--|--|--|
| Company name | | | | |
| | | | | |
| Address | | | | |
| | | | | |
| | | | | |
| Post town | | | | |
| County/Region | | | | |
| Postcode | | | | |
| Country | | | | |
| DX | | | | |
| Telephone | | | | |

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 attached the required documents.
- ☐ 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

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 *

| Administrator Administrative receiver Receiver Receiver Manager Nominee Supervisor Liquidator Provisional liquidator Insolvency practitioner's name Insolvency practitioner's address Building name/number Street | | additional insolvency practitioners. | |
|--|----------------------|--|--|
| Administrator Administrator Receiver Receiver Manager Nominee Diquidator Directioner's name Insolvency practitioner's address Surrame Street Street | 1 | Appointment type | |
| Full forename(s) Surname Insolvency practitioner's address Building name/number Street Post town County/Region Postcode | | □ Administrator □ Administrative receiver □ Receiver □ Manager □ Nominee □ Supervisor □ Liquidator | - VAM1, VAM2, VAM3, VAM4, VAM6, VAM7 - CVA1, CVA3, CVA4 - AM02, AM03, AM04, AM05, AM06, AM07, AM08, AM09, AM10, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25 - REC1, REC2, REC3 - LIQ02, LIQ03, LIQ05, LIQ13, LIQ14, WU07, WU15 - COM1, COM2, COM3, COM4 |
| Surname Insolvency practitioner's address Building name/number Street Post town County/Region Postcode | 2 | Insolvency practitioner's name | |
| Insolvency practitioner's address Building name/number Street Post town County/Region Postcode | Full forename(s) | | |
| Building name/number Street Post town County/Region Postcode | Surname | | |
| Post town County/Region Postcode | 3 | Insolvency practitioner's address | |
| Post town County/Region Postcode | Building name/number | | |
| County/Region Postcode | Street | | |
| Postcode | Post town | | |
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