

NOTICE OF RESIGNATION OF LIQUIDATOR (INELIGIBILITY TO ACT)

Section 179(2)
Rule 102

Please insert Company Number below:
(Include an * immediately before and after
the number)

To:
The Registrar of Companies
Companies House
30 - 38 Main Street
P.O. Box 848
Gibraltar

Company name

Company number

*Name and address of
resigned liquidator*

IP licence number(s)

*The resignation of a
liquidator takes effect
from the date that notice
is received by the Official
Receiver, as endorsed on
the notice*

1. I give notice that I resigned as liquidator of the above company on the grounds that I am no longer eligible to act as an insolvency practitioner in relation to the company
2. A copy of my notice of resignation endorsed by the Official Receiver with the date of receipt is attached
3. My resignation is effective from _____

Signed _____

Liquidator

Date _____

*Contact details
(Phone/e-mail)*

Note: If the company is an authorised person, within the meaning of the Insolvency Act, a copy of this notice must be provided to the Financial Services Commission