3       Administrator's name         Full forename(s)	In accordance with Rule 3.61(1) of the Insolvency (England & Wales) Rules 2016 & Paragraph 84(8) of Schedule B1 of the Insolvency Act 1986.	AM23 Notice of move from administration to dissolution	Companies House
Company number > Filling in this form   Company name in full > Please complete in typescript or in bold black capitals.   2 Court details   Court name			refer to our guidance at
Company number Filling in this form   Company name in full Please complete in typescript or in bold black capitals.   2 Court details   Court name	1	Company details	
Company name in full   2   Court details   Court name   2   Court number   3   Administrator's name   Full forename(s)   Surname   4   Administrator's address   Building name/number   Stret   Post town   County/Region   Postcode			→ Filling in this form
Court name			Please complete in typescript or in
Court number       Administrator's name         3       Administrator's name         Full forename(s)	2	Court details	
3       Administrator's name         Full forename(s)	Court name		
Full forename(s)   Surname   4   Administrator's address   Building name/number   Street   Post town   County/Region   Postcode	Court number		
Surname   Administrator's address   Building name/number   Street   Post town   County/Region   Postcode	3	Administrator's name	
4 Administrator's address   Building name/number   Street   Post town   County/Region   Postcode	Full forename(s)		
Building name/number         Street         Post town         County/Region         Postcode	Surname		
Building name/number         Street         Post town         County/Region         Postcode	4	Administrator's address	·
Street			
County/Region Postcode	Street		
Postcode	Post town		
	County/Region	·	
	Postcode		
Country	Country		

## AM23 Notice of move from administration to dissolution

Full forename(s)          • Other administrator         Use this section to tell us a         another administrator.          Surname          • Administrator's address •          Building name/number          • Other administrator	5	Administrator's name 🛛	
6 Administrator's address @   Building name/number   Street   Post town   County/Region   Postcode   Postcode   Country   7   Final progress report   I have attached a copy of the final progress report			Use this section to tell us about
Building name/number Building name/number Street  Post town County/Region Postcode  Final progress report  Final progress report  I have attached a copy of the final progress report  Signature  Signature Signature  Signature Signature Signature Signature Signature Signature Signature Signature Signature Signature Sign			another administrator.
Street Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator. Use this section to tell us a another administrator.  Soundry  Final progress report I have attached a copy of the final progress report  Signature S	6	Administrator's address 🛛	
County/Region Postcode Postcode Final progress report I have attached a copy of the final progress report Sign and date Administrator's Signature			Use this section to tell us about
Postcode Country	Post town		
Country   7   Final progress report   I have attached a copy of the final progress report   8   Sign and date   Administrator's ignature   ignature	County/Region		
7 Final progress report   □ I have attached a copy of the final progress report   8 Sign and date   Administrator's signature Signature	Postcode		
8 Sign and date   Administrator's signature Signature	Country		
8 Sign and date   Administrator's signature Signature	7	Final progress report	
signature X X			
Signature date <sup>d</sup> <sup>m</sup> <sup>m</sup> <sup>w</sup> <sup>y</sup> <sup>y</sup> <sup>y</sup>			
	Signature date	d d m m y y y	

Presenter information	Important 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.	All information on this form will appear on the public record.	
Contact name	☑ Where to send	
Company name	You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:	
Address	The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.	
Post town		
County/Region		
Postcode	i Further information	
Country DX Telephone	For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk	
Checklist We may return forms completed incorrectly or with information missing.	This form is available in an alternative format. Please visit the forms page on the website at	
<ul> <li>Please make sure you have remembered the following:</li> <li>The company name and number match the information held on the public Register.</li> <li>You have attached the required documents.</li> <li>You have signed the form.</li> </ul>	www.gov.uk/companieshouse	