In accordance with Rule 3.43(1) of the Insolvency (Scotland) (Company Voluntary Arrangements and Administration) Rules 2018	AM09 (Scot) Notice of result of creditors' decision on revised administrator's proposals	Companies House
		For further information, please refer to our guidance at www.gov.uk/companieshouse
1	Company details	
Company number		→ Filling in this form
Company name in full		Please complete in typescript or in bold black capitals.
2	Administrator's name	
Full forename(s)		
Surname		
3	Administrator's address	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
4	Administrator's name •	
Full forename(s)		• Other administrator
Surname		Use this section to tell us about another administrator.
	Administrator's address 9	
5	Administrator's address <sup>o</sup>	
Building name/number		Other administrator Use this section to tell us about
Street		another administrator.
Post town		—
County/Region		—
Postcode		
Country		

6	Date of re	-		ls					
Date	d d	m	m	у	У	у	У		
7	Purpose of	f proc	edure or	me	etin	g			
8	Descriptio	n of p	rocedure	e or	mee	tine	0 O		
							J		SWhether it was a virtual or physical
									meeting, some other decision procedure (please describe), or deemed consent.
9	Address of	f mee	ting						1
	If a meeting v	was hel	d at a phys	ical lo	ocatio	n, gi	ve the address belo	w.	
Building name/number									
Street									
Post town									
County/Region									
Postcode									
Country		. !							

10	Other platform for decision procedure or meeting •	
		• If a meeting was not held at (or the decision procedure was not undertaken at) a physical location, tell us what means were used—for example email, videolink
11	Meeting	
	If a meeting was held was the required quorum met?	
	□ Yes	
	□ No	
12	Details of creditors' decisions	· · · · · · · · · · · · · · · · · · ·
	Details of decisions including any modifications to the proposals approved by the creditors are as follows:	
13	Details of any resolutions passed	
	Give details of any resolutions which were passed.	_

14	Date a	nd ti	ime of an	y decisi	on r	nad	e or resolu	ution passed		
Date	d d		m m	У	У	У	У		[	
Time	h h	:	m m	·		•				
15	Sign a	nd da	ate							
Administrator's signature	Signature								X	
Signature date	dd		m m	У	У	у	у			

Important information I information on this form will appear on the ablic record. Where to send Wher
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Further information
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