In accordance with Section 1046 of the Companies Act 2006 & Regulation 13 of the Overseas Companies Regulations 2009

OS AP01

BLUEPRINT

OneWorld

Appointment of director of an overseas company

What this form is for You may use this form to appoint an individual as a director of an overseas company What this form is NOT
You cannot use the form
a corporate director of ar
company To do this, plea
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director of an overseas co



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13/05/2014

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		COMPANIES HOUSE				
1	Overseas company details					
Company number Company name in full or alternative name as registered in the UK	GS EUROPEAN OPPORTUNITIES FUND S B V	→ Filling in this form Please complete in typescript or in bold black capitals All fields are mandatory unless specified or indicated by *				
2	Date of director's appointment					
Date of appointment	$\begin{bmatrix} d & 1 & d & 7 & & & & & & & & & & & & & & & &$					
3	New director's details	. <u> </u>				
Title*	MR	• Former name(s) Please provide any previous name				
Full forename(s)	OLIVER JOHN GEOFFREY	which have been used for business purposes in the past 20 years				
Surname	BINGHAM	Married women do not need to give				
Former name(s) •		former names unless previously used for business purposes				
Country/State of residence	UNITED KINGDOM	Continue in Section 8 if required				
Nationality	BRITISH	Ocuntry/State of residence This is in respect of your usual				
Date of birth	$\begin{bmatrix} d & 2 & & & \\ & 2 & & & \\ & & & \end{bmatrix} \begin{bmatrix} m & 0 & \\ & & & \end{bmatrix} \begin{bmatrix} m & 3 & \\ & & & \end{bmatrix} \begin{bmatrix} y & 1 & y & \\ & & & & \\ & & & & \end{bmatrix} \begin{bmatrix} y & 1 & y & \\ & & & & \\ & & & & \end{bmatrix} \begin{bmatrix} y & 1 & y & \\ & & & & \\ & & & & \\ & & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & y & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & & \\ & & & & \\ \end{bmatrix} \begin{bmatrix} y & 1 & & & \\ & & & $	residential address as stated in Section 4a				
Business occupation (if any)	CHARTERED ACCOUNTANT	Business occupation If you have a business occupation, please enter here If you do not, please leave blank				
4	New director's service address ©					
	Please complete your service address below You must also complete your usual residential address in Section 4a	• Service address This is the address that will appear				
Building name/number	WORLD TRADE CENTRE, TOWER A	on the public record. This does not have to be your usual residential.				
Street	12th FLOOR, STRAWINSKYLAAN 1207	address. If you provide your residential				
	1077XX	address here it will appear on the public record				
Post town		Farmonation				
County/Region	AMSTERDAM					
Postcode						
Country	NETHERLANDS					

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5	Director's authority	•					-		_	
	Please enter the extent of your authority as director Please tick one box				If you have indicated that the extent					
Extent of authority	☐ Limited ① ☐ Unlimited		of your authority is limited, please provide a brief description of the limited authority in the box below If you have indicated that you are not authorised to act alone but only							
Description of limited			l r	ointly,	please	enter	the na	ıme(s)	of	
authority, if applicable	Are you authorised to act alone or jointly? Please tick one box				son(s) sed to		whom : elow	you ar	е .	
	☑ Alone □ Jointly •									
if applicable, name(s) of person(s) with whom you are acting jointly										
6	UK establishments								_	
	A return must be delivered in respect of any alteration to the company particulars by each UK establishment. If, however, a company has more than UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below.	n one								
	UK establishment name	Regi	stration number							
	·									
7	Signature				-					
Signature	Signature X	X								
	This form may be signed and authorised by Director, Secretary, Permanent representative									
8	Additional former name(s) (continued from Section 3)		,						_	
Former name(s) 9			Additional former names Use this space to enter any additional names.							

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Presenter information	I 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.	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.						
Contact name SUSAN FADIL	₩ Where to send						
Company name TMF-GROUP	You may return this form to any Companies House address						
Address FIFTH FLOOR 6 ST ANDREW STREET	England and Wales: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff						
Post town LONDON County/Region Postcode E C 4 A 3 A E Country UNITED KINGDOM	Scotland The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post) Northern Ireland. The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG DX 481 N R Belfast 1						
Telephone							
We may return forms completed incorrectly or with information missing Please make sure you have remembered the following	Higher protection If you are applying for, or have been granted, higher protection, please post this whole form to the different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE						
The company name and number as registered in the UK match the information held on the public Register	Further information						
☐ You have completed the date of appointment ☐ You have included all former names used for business purposes over the last 20 years. ☐ You have completed the nationality box in Section 3	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk						
 You have provided a correct date of birth You have provided a business occupation if there is one. You have provided both the service address and the 	This form is available in an alternative format. Please visit the						
usual residential address. Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or EP (Legal Post in Scotland) number. You have enclosed a relevant higher protection application if applying for this at the same time as	forms page on the website at www.companieshouse.gov.uk						
completing this form. You have entered the extent of the director's authority in Section 6 You have completed Section 6, if applicable You have signed the form							