Please complete in typescript, or in bold black capitals

LLP 296a

(LLP Act (Ni) 2002 Section 9)

APPOINTMENT OF A MEMBER TO A LIMITED LIABILITY PARTNERSHIP

(NOT for terminating membership (use Form LLP 296b) or change of particulars (use Form LLP 296c))

	LLP Number	STLLP 526
Full Name of Limited		LIDINGSANCE
	Liability Partnership	ELECTRICAL LLP
	Date of appointment	Day Month Year
	Date of birth	Day Month Year 012 014 1191810
Peers or others known by a title ma use the title instead of or in addition to their name	·	Boyce
	Forename(s)	GRAEME SAMUEL
l	Usual residential address	207 ABBEY ROAD
	Town	MILLISLE Postcode B122 20H
	County	DOWN Country NI
(Pie	Designated member ease tick appropriate box)	YES NO

I consent to act as a member of the above named limited liability partnership

Consent signature



Date



Another Member being a Designated Member must sign and date the form in the boxes below.

Signed (csc) 2ed

Date 28/09/0

You do not have to give any contact information in the box opposite but if you do, it will help Companies Registry to contact you if there is a query on the form The contact information that you give will be visible to searchers of the public record

Form November 2004

Fitch Chartered Accountants Gordon Street Mews 27-29 Gordon Street Belfast BT1 2LG

Tel: 02890 322047 Fax: 02890 323798

ırm \_s at

Companies Registry, 1st Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, BT1 3BS