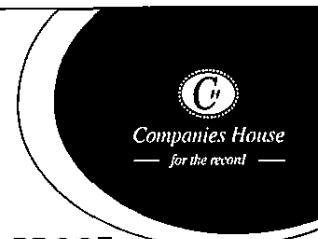


LLAP01

Appointment of member of a Limited Liability Partnership (LLP)



This form is part of the PROOF scheme. If your LLP is registered for PROOF paper versions of this form will be rejected and sent to your office address. Avoid unnecessary rejection and file online. You can view your LLP's PROOF status on the Web

☒ **What this form is for**
You may use this form to appoint an individual as a member of an LLP.

☐ **What this form is NOT for**
You cannot use this form to appoint a corporate member. If you wish to do this, please use form 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'.

FRIDAY
WEDNESDAY



J19NAUGZ #81
JNI 25/05/2012
COMPANIES HOUSE
J190TGOO #56
JNI 16/05/2012
COMPANIES HOUSE

1 LLP details

LLP number N C 0 0 0 7 8 0

LLP name in full BLACKCUBE WEALTH MANAGEMENT LLP

→ **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 member's appointment

Date of appointment d 1 m 0 y 2 0 1 2

3 New member's details

Title * MR

Full forename(s) JONATHAN

Surname GWYNNE

Former name(s) ①

Country/State of residence ② NORTHERN IRELAND

Date of birth d 2 m 9 y 0 6 1 9 7 6

Appointment type ③ Are you being appointed as a designated member?

☐ Yes

☒ No

① Former name(s)

Please provide any previous names which have been used for business purposes in the past 20 years.

Married women do not need to give former names unless previously used for business purposes.

Continue in Section 6 if required.

② Country/State of residence

This is in respect of your usual residential address as stated in Section 4a.

③ Appointment type

Your designation must match the status of the LLP.

4 New member's service address ④

Please complete the service address below. You must also complete the member's usual residential address in Section 4a.

Building name/number 7

Street JAMES STREET SOUTH

Post town BELFAST

County/Region ANTRIM

Postcode B T 2 8 0 N

Country N. Ireland

④ Service address

This is the address that will appear on the public record. This does not have to be your usual residential address.

Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of members as the LLP's registered office.

If you provide your residential address here it will appear on the public record.

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

5

Signatures

I consent to act as member of the above named LLP.

New member's
signature

Signature

X



X

Authorising signature

Signature

X



X

This form may be signed and authorised by: Designated member, Judicial factor.

6

Additional former names (continued from Section 3)

Former names ①

① Additional former names

Use this space to enter
any additional names.

**Presenter 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.

Contact name

B J Eashwood

Company name

Blackcube Wealth Management

Address

7 James Street South

Post town

Belfast

County/Region

Antrim

Postcode

BT2 8DN

Country

N. Ireland

DX

Telephone

07530278788

**Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The LLP name and number match the information held on the public Register.
- ☐ You have provided a correct date of birth.
- ☐ You have completed the date of appointment.
- ☐ You have completed the appointment type.
- ☐ You have indicated if you are a designated member.
- ☐ You have provided both the service address and 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 LP (Legal Post in Scotland) number.
- ☐ You have included all former names used for business purposes over the last 20 years.
- ☐ You have enclosed a relevant Section 243 application if applying for this at the same time as completing this form.
- ☐ The new member has signed the form.
- ☐ An authorising signature has been given by a designated member.

**Important information**

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.

**Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:

**For LLPs registered in
England and Wales:**

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ
DX 33050 Cardiff.

For LLPs registered in 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).

**For LLPs registered in
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.

Section 243 exemption

If you are applying for, or have been granted, a section 243 exemption, please post this whole form to the different postal address below:
The Registrar of Companies, PO Box 4082,
Cardiff, CF14 3WE.

**Further information**

For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk