

Please complete in typescript, or in bold black capitals. CHWP000

## LLP288a

(LLP Act 2000 Section 9)

DX ED235 Edinburgh

## Appointment of a Member to a Limited **Liability Partnership**

(NOT for terminating membership (use Form LLP288b) or change of particulars (use Form LLP288c))

	• • • • • • • • • • • • • • • • • • • •
LLP Number	OC 303945
Full Name of Limited Liability Partnership	THE SEROND MEZZAWIWE FILM KIND
Date of appointment	Day Month Year  3   1   2   2   2   2   3   Day Month Year
* Voluntary Member Reference Number * Information (As advised by Companies House)	Date of barth 1 2 1 2 1 9 6 19
Peers or others Surname or known by a title may Corporate name use the title instead	CARLETT
of or in addition to Forename(s) their name	GREGORY GERRAND 4 BLUEBELL CLOSE
Usual residential address **	4 BLUEBELL CLOSE
ff Tick this box if the address	
shown is a service address Post town for the	LIVERPOOL POSTCOODE L22 374
beneficiary of a County / Region Confidentiality County / Region	Country
the Article	/
under section 7238 of the Designated member Compenies Act (Please tick appropriate 1985 otherwise, box)	YES NO
under section 7238 of the Designated member Compenies Act (Please tick appropriate	I consent to act as a member of the above named limited liability partnership
under section 7238 of the Designated member Compenies Act 1985 otherwise, give your usual residential address. In the case of a  Consent signature	I consent to act as a member of the above named limited liability partnership
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office	I consent to act as a member of the above named limited liability partnership  Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Signed  You do not have to give any contact	I consent to act as a member of the above named limited liability partnership  Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes below.  Date 31.10.03  Designated Member
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Signed  You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on	I consent to act as a member of the above named limited liability partnership  Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes below.  Date 31.10.03
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Signed  You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to	Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes before.  Date 31.10.03  Date 31.10.03  Designated Member  Date 31.10.03
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Signed  You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information	I consent to act as a member of the above named limited liability partnership  Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes below.  Date 31.10.03  Designated Member  ADGER HAKIM SECRETARIES LIMITED  10 DOVER STREET
under section 7238 of the Compenies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Signed  You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to	I consent to act as a member of the above named limited liability partnership  Date 31.10.03  Another Member being a Designated Member must sign and date the form in the boxes below.  Date 31.10.03  Designated Member  ADGER HAKIM SECRETARIES LIMITED  10 DOVER STREET  LONDON

for partnerships registered in Scotland