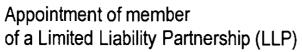
in accordance with Section 9 of the Limited Liability Partnerships Act 2000

LL AP01





•		For further information, please refer to our guidence of the state of	
1		03/07/2010 262 ——— MPANIES HOUSE	
LLP number	O C 3 1 1 2 9 7	Please complete in typescript or in	
LLP name in full	Baker & McKenzie LLP	bold black capitals All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment	 ,	
Date of appointment	$\begin{bmatrix} d & 0 \end{bmatrix} \begin{bmatrix} d & 1 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 7 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 1 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix}$		
3	New member's details		
Title * Full forename(s)	Michelle Louise	Former name(s) Please provide any previous names which have been used for business purposes in the past 20 years	
Surname	BLUNT	Marned women do not need to give former names unless previously used for business purposes	
Former name(s)		Continue in Section 6 if required	
Country/State of residence 2	United Kingdom Image	Country/State of residence This is in respect of your usual residential address as stated in	
Date of birth		Section 4a Appointment type	
Appointment type	Are you being appointed as a designated member? Yes No	Your designation must match the status of the LLP	
4	New member's service address ⊙		
	Please complete the service address below You must also complete the member's usual residential address in Section 4a .	Service address This is the address that will appear on the public record. This does not	
Building name/number	The LLP's registered office	have to be your usual residential address	
Street		Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of	
Post town	ost town		
County/Region		If you provide your residential	
Postcode		address here it will appear on the public record	
Country			

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	X Signature X	
Authorising signature	Signature X	
	This form must be signed and authorised by a designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names 1		Additional former names Use this space to enter any additional names

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

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	
DA 33030 Caldill	
For LLPs registered in Scotland ¹ 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, First Floor, Waterfront Plaza, 8 Laganbank Road,	
Belfast, Northern Ireland, BT1 3BS 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	