

Please complete in typescript, or in bold black capitals.

CHWP000

## LLP288a

(LLP Act 2000 Section 9)

## Appointment of a Member to a Limited Liability Partnership

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

LLP Numbe	OC312218		
Full Name of Limited Liability Partnership		)	
Date o appointment			
* Voluntary Member Reference Number * Information (As advised by Companies House)	·	Date of birth	y Month Year 4 0 5 1 9 6 7
Peers or others Surname o known by a title may Corporate name use the title instead			
of or in addition to Forename(s) their name	ANGUS IAN		
Usual residential address	44 CARDINAL GARDENS		
** Tick this box if the address			
shown is a service address Post town for the	DARLINGTON	UK Postcode	DL3 8SD
beneficiary of a Confidentiality Order granted  County / Region	CO DURHAM	Country	ENGLAND
under section 723B of the Companies Act  (Please tick appropriate	17 1 1 2 2	NO	
1985 otherwise, box, give your usual residential		e above named	limited liability partnership
1985 otherwise, box, give your usual	I consent to act as a member of th	e above named	limited liability partnership
1985 otherwise, give your usual residential address, In the case of a  Consent signature	I consent to act as a member of th	Date	1.04.2008
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 Angu Another Member being a Designated Mebelow.	Date	1.04.2008
1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Consent signature Consent signature Signature Consent signa	I consent to act as a member of the Angu Another Member being a Designated Member Designated Member	Date ember must sign a	1 · O · · · Zecs
1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Consent signature  Consent signature  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	Another Member being a Designated Member  Designated Member  Clive Owen & Co Chartered Accounta	Date  Date  Date	1 · O · · · Zecs
1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.  Consent signature Consent signature Signature Consent signa	Another Member being a Designated Member  Designated Member  Clive Owen & Co Chartered Accounta 140 Coniscliffe Ros DARLINGTONT	Date  Date  Date	nd date the form in the boxes
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	Another Member being a Designated Member  Clive Owen & Co Chartered Accounta 140 Coniscliffe Ros DARLINGTONT Co Durham E-mail DL3 7RT  When you have completed and signed in the companies at:	Date  Date  Date  Date  Date  Date  Date  Date  Date  Date	nd date the form in the boxes  (. Oc Zoos  9700  ease send it to the