

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

## LLP288a

(LLP Act 2000 Section 9)

DX 235 Edinburgh or LP - 4 Edinburgh 2

## 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	00312342
Full Name of Limited Liability Partnership	AMERICAS S LIMITED LIABILITY PARTNERSHIP
Date of appointment  * Voluntary Member Reference Number * Inhamation (As advised by Companies House)	Day         Month         Year           0 5 0 1 20 0          Day         Month         Year           10 5175         Date of barth         26 09 1978   197
Pears or others Surname or known by a title may Corporate name	Marcon
use the fulle instead of or in admitten to Forename(s) their name	Craig Stephen
Usual residential address **	4 Plas Y Fedwen
* Tick this box if the address	Coed Y Cwm
shown is a service address Post town for the	Pontypridd UK Postcode CF37 5BG
beneficiary of a Confidentiality Order granted  County / Region	South Wales Country UK
under section 7238 of the Designated member	YES NO
Companies Act (Please tick appropriate 1985 otherwise, give your usual	I consept)to act as a member of the above named limited trability partnership
1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office.	
1985 otherwise, give your usual residential address. In the case of a Consent signature corporation, give the registered or	I consent to act as a member of the above named limited (lability partnership  Date [9] 12 0 6  Another Member being a Designated Member must sign and 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	I consent to act as a member of the above named limited (lability partnership  Date [9]12 06  Another Member being a Designand Member must sign and date the form in the boxes below.
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.	I consent to act as a member of the above named limited (lability partnership  Date [9]12]06  Another Member being a Designated Member must sign and date the form in the boxes below.
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	Date 1912 06  Another Member being a Designand Member must sign and date the form in the boxes below.  Date 05 107