In accordance with Section 9 of the Limited Liability Partnerships Act 2000.

LL CH01

Change of details of a member of a Limited Liability Partnership (LLP)



What this form is for

You may use this form to change the details of an individual person who is a member.

What this form is NOT You cannot use this form the details of a corporat To do this, use form LL C 'Change of details of a c



| | Partnership'. | COMPANIES HOUSE | |
|---------------------|---|--|--|
| 1 | LLP details | | |
| LLP number | 0 C 3 1 7 3 2 1 | Filling in this form Please complete in typescript or in bold black capitals. All fields are mandatory unless specified or indicated by * | |
| LLP name in full | Green Park Sequestration LLP | | |
| | | | |
| 2 | Member's current details on the Register • | | |
| Date of birth * | d 2 d m 1 m 2 y 1 y 9 y 7 y 0 | • Current details This information is used to identify your details on the LLP record. Providing a date of birth will help us identify the correct person on the public record. This is voluntary information and if completed it will | |
| Title * | Mr | | |
| Full forename(s) | David | | |
| Surname | Zahn | be placed on the public record. | |
| 3 | Date of change of details | | |
| Date of change | $\begin{bmatrix} d & 1 & \end{bmatrix} \begin{bmatrix} d & 1 & \end{bmatrix} \begin{bmatrix} m & 0 & \end{bmatrix} \begin{bmatrix} m & 1 & \end{bmatrix} \begin{bmatrix} y & 2 & y & 0 & y & 1 \end{bmatrix} \begin{bmatrix} y & 0 & y & 1 & y & 0 \end{bmatrix}$ | | |
| of details | Please complete the appropriate sections to indicate which of your details have changed. | | |
| 4 | Change of name details | | |
| Title * | | New name Please enter your new name. | |
| Full forename(s) 10 | | _ | |
| Surname 2 | | | |
| 5 | Change of service address ® | | |
| Building name/numb | per The LLP's registered office | Service address This is the address that will appear on the public record. This does not have to be your usual residential address. | |
| Street | | | |
| Post town | | Please state 'The LLP's Registered Office' if your service address is recorded in the company's register of members as the LLP's registered | |
| County/Region | | | |
| Postcode | | office. | |
| Country | I confirm that there has been no change in the LLP's register of members' | If you provide your residential address here it will appear on the public record. | |
| | residential addresses. | Please complete Section 5a if your usual residential address has changed. | |

LL CH01

Change of details of a member of a Limited Liability Partnership (LLP)

| 6 | Change of country/state of residence | | |
|--|---|--|--|
| Change of country/ state of residence | | | |
| 7 | Change of status of member | | |
| Member's consent signature ② | I consent to act as a • designated member member of the above named LLP. Signature X | × | O Change of status Please tick one box. Consent signature Please sign to indicate your consent to the change of status. Please only sign here if you are changing your status as a member. |
| 8 | Authorising signature ® | | |
| _ | This must be completed in all cases. I am signing this form on behalf of the LLP. | ● Authorising signature This must be signed in all cases. | |
| Signature | Signature X This form may be signed by: Designated member, Judicial factor. | × | |

LL CH01

Change of details of a member of a Limited Liability Partnership (LLP)

| <u>-</u> | Presenter information |
|--------------|--|
| you on tl | do not have to give any contact information, but if do it will help Companies House if there is a query he form. The contact information you give will be ale to searchers of the public record. |
| Contac | t name |
| Compa | ny name |
| Addres | s |
| | |
| Post to | DWN |
| Count | y/Region |
| Postco | de |
| Count | |
| DX | |
| Teleph | none |
| | |
| <u>√</u> | Checklist |
| | may return forms completed incorrectly or hinformation missing. |
| | ase make sure you have remembered the |
| foll | lowing: The LLP name and number match the information |
| ╙ | held on the public Register. |
| | You have completed in Section 3 the date of change |
| | of details. |
| | If you have changed the service address, you have |
| | ticked the no change box in Section 5 to indicate no |
| | change in your usual residential address or provide your new usual residential address in Section 5a. |
| | in the state of Th |
| | cannot be a PO Box number (unless part of a full |
| | service address), DX or LP (Legal Post in Scotland) |
| | number. |
| 1 | You have entered the relevant change of details. |
| | You have signed your consent if you have changed your membership status in Section 7. |
| 1 | vour membersnip status in section 7. |

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, 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

☐ A designated member has signed the form in

Section 8.