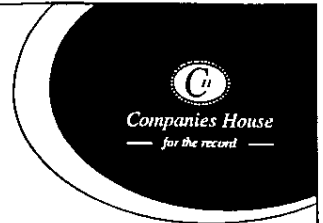


# LL CH01

## 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 for

You cannot use this form to change the details of a corporate member. To do this, use form LL CH02 'Change of details of a corporate member of a Limited Liability Partnership'.

THURSDAY



A59

\*ACLIVH12\*  
28/01/2010  
COMPANIES HOUSE

311

### 1 LLP details

LLP number O C 3 1 7 3 2 7

LLP name in full Maia Green LLP

→ Filling in this form

Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by \*

### 2 Member's current details on the Register ①

Date of birth \* <sup>d</sup>1 <sup>d</sup>2 <sup>m</sup>1 <sup>m</sup>0 <sup>y</sup>1 <sup>y</sup>9 <sup>y</sup>6 <sup>y</sup>0

Title \* Mr

Full forename(s) Sunny

Surname Ahonsi

① 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 be placed on the public record.

### 3 Date of change of details

Date of change of details <sup>d</sup>1 <sup>d</sup>1 <sup>m</sup>0 <sup>m</sup>1 <sup>y</sup>2 <sup>y</sup>0 <sup>y</sup>1 <sup>y</sup>0

Please complete the appropriate sections to indicate which of your details have changed.

### 4 Change of name details

Title \*

Full forename(s) ②

Surname ②

② New name

Please enter your new name.

### 5 Change of service address ③

Building name/number The LLP's registered office

Street

Post town

County/Region

Postcode

Country

③ Service address

This is the address that will appear on the public record. This does not have to be your usual residential address.

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 office.

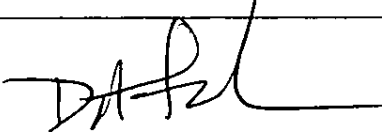
If you provide your residential address here it will appear on the public record.

Please complete Section 5a if your usual residential address has changed.

☒ I confirm that there has been no change in the LLP's register of members' residential addresses.

# LL CH01

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

|                                          |                                                                                                                                     |                                                                                                                                                                                                                                  |
|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6</b>                                 | <b>Change of country/state of residence</b>                                                                                         |                                                                                                                                                                                                                                  |
| Change of country/<br>state of residence |                                                                                                                                     |                                                                                                                                                                                                                                  |
| <b>7</b>                                 | <b>Change of status of member</b>                                                                                                   |                                                                                                                                                                                                                                  |
|                                          | I consent to act as a ①<br><input type="checkbox"/> designated member<br><input type="checkbox"/> member<br>of the above named LLP. | <b>① Change of status</b><br>Please tick one box.<br><b>② Consent signature</b><br>Please sign to indicate your consent<br>to the change of status.<br><br>Please only sign here if you are<br>changing your status as a member. |
| Member's consent<br>signature ②          | Signature<br>X                                                                                                                      | X                                                                                                                                                                                                                                |
| <b>8</b>                                 | <b>Authorising signature ③</b>                                                                                                      |                                                                                                                                                                                                                                  |
|                                          | This must be completed in all cases.<br>I am signing this form on behalf of the LLP.                                                | <b>③ Authorising signature</b><br>This must be signed in all cases.                                                                                                                                                              |
| Signature                                | Signature<br>X  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)



### Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone



### Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ 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 provided your new usual residential address in Section 5a.
- ☐ Any new address must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number.
- ☐ You have entered the relevant change of details.
- ☐ You have signed your consent if you have changed your membership status in Section 7.
- ☐ A designated member has signed the form in Section 8.



### 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](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.companieshouse.gov.uk)