

Please complete in typescript, or in bold black capitals.

Application for Incorporation of a Limited **Liability Partnership**

CHFP025		UU ± A J A
2		
Please leave this box blank	OC32\385	004232
Full Name of Limited	QUORUM DEVELOPER (MP5.3) LLP	
Liability Partnership		
Situation of Registered		
Office	ENGLAND AND WALES	
	Insert "England and Wales", "Wales" or "Scotland	d"
	3	
Registered Office	1 PARK ROW	
Address		
_		
Post town	LEEDS	
PO Box number only is not County / Region	UK	LS1 5AB
only is not acceptable County / Region	Postcode	TIOT DAD
·		
Will all Members from time to		f no, at least two of the
time be designated members?		isted members must be
(List members overleaf)	C	designated members
Number of continuation sheets		
attached to this application for		
incorporation		
	I certify that I am a: (Please tick appropriate box)	
	Solicitor engaged in the formation of the	nio II D
	Solicitor engaged in the formation of the	IIS EEF
	x Member named overleaf of the LLP	
	And that the two or more persons named overleaf are associated for carrying on a lawful business with a view to profit	
	carrying on a lawful business with a view to profit. PINSENT MASONS DIRECTOR	
Signed		02.08.2006
J	and an	
You do not have to give any contact	Pinsent Masons	

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 searchers of the public record.



03/08/2006

1 Park Row Leeds

LS1 5AB

Ref: TDO

Tel 0113 368 6576

E-mail tammy.dobbie@pinsentmasons.com

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff

for partnerships registered in England and Wales or

for partnerships registered in Scotland

DX ED235 Edinburgh

LIST OF Members o	n incorporation		
Peers or others known by a title may use the title instead	Surname or Corporate name	PINSENT MASONS DIRECTOR LIMITED	
of or in addition to their name	Forename(s)		
	r Reference Number * s advised by Companies House)	Date of Day Month Year Birth	
Usual Residential Address the (or registered or principal office address in the case of a corporation or Scottish firm)		1 PARK ROW	
provisions of section	Post town	LEEDS	
	County / Region	UK Postcode LS1 5AB	
723B of the Companies Act 1985	Country		
* Voluntary information	Signed	I consent to act as a member of the limited liability partnership named on page 1 (Please tick this box if consenting to act as a designated member) For and on behalf of PINSENT MASONS DIRECTOR LIMITED Director/Secretary (Member to sign and date) Date	
	Surname or Corporate name	PINSENT MASONS SECRETARIAL LIMITED	
of or in addition to their name	Forename(s)		
	r Reference Number * s advised by Companies House)	Date of Birth Birth	
Usual Residential Address tt (or registered or principal office address in the case of a corporation or Scottish firm)	1 PARK ROW		
address shown is a service address for the beneficiary of a	Post town	LEEDS	
Confidentiality Order granted under the provisions of section	County / Region	UK Postcode LS1 5AB	
723B of the Companies Act 1985	Country		
* Voluntary information		I consent to act as a member of the limited liability partnership named on page 1 (Please tick this box if consenting to act as a designated member) To and on behalf of	
	Signed	PINSENT MASONS SECRETARIAL	

NOTE: Unless there are at least two designated members, all members will be designated members.

FILE COPY



CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership No. OC321385

The Registrar of Companies for England and Wales hereby certifies that QUORUM DEVELOPER (MP5.3) LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited.

Given at Companies House, Cardiff the 03 August 2006



