

Please complete in typescript, or in bold black capitals.

CHWP000



(LLP Act 2000 Section 9)

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	oc323563
Full Name of Limited Liability Partnership	NATURAL RETREATS PENSION LLP
Date of appointment	Day Month Year  2   0   0   5   2   0   0   9  Day Month Year
* Voluntary Member Reference Number * Information (As advised by Companies House)	Date of birth 11001119144
Peers or others known by a title may use the title instead  Surname or Corporate name	CHADWICK
of or in addition to Forename(s) their name	DAVID
Usual residential address **	WITCH'S GATE
†† Tick this box if the address shown is a	MACCLESFIELD ROAD
service address Post town for the beneficiary of a	ALDERLEY EDGE Postcode 5kg 7BL
Confidentiality County / Region Order granted under section	Country UK
723B of the Designated member Companies Act (Please tick appropriate 1985 otherwise, box)	. YES / NO
give your usual residential address. In the	I consent to act as a member of the above named limited liability partnership
case of a Consent signature corporation, give the registered or	Another Member being a Designated Member must sign and date the form in the boxes
principal office address.	below.
Signed	Date 18/9/09
You do not have to give any contact information in the box opposite but if	Designated Member
you do, it will help Companies House to contact you if there is a query on the form. The contact information	
	Tel
SDAY	DX number DX exchange
*DVIX9EHR* DSR 28/10/2009 8 COMPANIES HOUSE	When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for partnerships registered in England and Wales or
COMPANIES HOUSE	Companies House, 139 Fountainbridge, Edinburgh, EH3 9FF for partnerships registered in Scotland
	DX 235 Edinburgh