



Please complete in typescript, or in bold black capitals CHFP041

LLP2

(Section 2 LLP Act 2000

Application for Incorporation of a Limited Liability Partnership

Please leave this box blank	OC33964R
Full Name of Limited Liability Partnership	-
Situation of Registered Office	England and wates
	Insert "England and Wales", "Wales" or "Scotland"
Registered Office Address	
	Durton Farx
Post town	Lincoln
PO Box number County / Region only is not acceptable	Lincolnshire DK Postcode LN1 2RB
Will all Members from time to time be designated members?	listed members must be
(List members overleaf)	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 this LLP
	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
Signed	Chorw o G Date 22/8/08
You do not have to give any contact information in the box opposite but if	Andrew & Co LLP
you do, it will help Companies House	St Swithin's Square
to contact you if there is a query on the form. The contact information that	Lincoln LN2 1HB Tel
you give will be visible to searchers of	DX number 11001 DX exchange LINCOLN
-	When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

for partnerships registered in England and Wales

for partnerships registered in Scotland

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

DX 33050 Cardiff

DX 235 Edinburgh

or LP - 4 Edinburgh 2

108

23/08/2008

COMPANIES HOUSE

List of Members on Incorporation			
Peers or others known by a title may use the title instead of or in addition to	Surname or Corporate name Forename(s)	Limes Estates Limited	
their name			Day Month Year
	ber Reference Number * dvised by Companies House)		Date of Birth
††Usual Residential Address (or registered or principal office address in		Limes House	
	the case of a corporation or Scottish firm)	Burton Park	
†† Tick this box if the address shown is a	Post town	Lincoln	
service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the	County / Ведиолх	Lincolnshire	Postcode LN1 2RB
	Country	England	
Companies Act 1985		I consent to act as a member of the on page 1	limited liability partnership named
		(Please tick this box if consenting to act	as a designated member)
* Voluntary information	Signed	Flinay.	Date 21.8:08
Peers or others known by a title may use the title instead of or in addition to	Surname or Corporate name Forename(s)	Jolly Marcus James Miles	
their name			Day Month Year
Member Reference Number * (as advised by Companies House)			Date of 2 6 0 9 1 9 6 7 Birth
	ual Residential Address (or registered or principal office address in the case of a	Ingleby Hall Stables	
†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section	corporation or Scottish firm)	Ingleby	
	Post town	Lincoln	
	County / Region	Lincolnshire	Postcode LN1 2PQ
723B of the Companies Act 1985	Country		
* Voluntary I consent to act as a member of the limited liability partnersh on page 1		limited liability partnership named	
		(Please tick this box if consenting to act	as a designated member) x
	Signed	MM	Date & (& (o &
NC	OTE Unless there are at least to	(Member to sign and date) wo designated members, all members will be	ne designated members

OYEZ 7 Spa Road, London SE16 3QQ

Limited Liability Partnership 2

2003 Edition 12 2003

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H \cwheeler\Jolly Mr M Mrs F Curtis & Limes Estates Ltd 01J0781\LLP formation 1\{LLP2\} 13 14 Golden Square LLP olf

LLP2/2

List of Memb	ers on Incorporation	
Peers or others known by a title n use the title instea of or in addition to their name	ad	Day Month Year
(as Usu (†† Tick this box if the address shown is a service	mber Reference Number* advised by Companies House) al Residential Address †† for registered or principal office address in the case of a corporation or Scottish firm)	
address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985	Post town County / Region Country	UK Postcode
* 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) Date (Member to sign and date)
Peers or others known by a title n use the title instea of or in addition to their name	ed Forename(s)	Fiona Claure
Member Reference Number* (as advised by Companies House) Usual Residential Address 11 11 Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985 Member Reference Number* (as advised by Companies House) (or registered or principal office address in the case of a corporation or Scottish firm) Post town County / Region Country	Day Month Year Date of Birth 3,10,81,9,7,0 5 Wellington close Notting Hill	
		LONDON UK Postcode WIL 2AN England
* 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) Date 21 8.08 (Member to sign and date)



LLP2cont

Full Name of Limited	13/14 GOLDEN SQUARE LLP
Liability Partnership	
List of Members on Incorporation	
Peers or others Surname or Corporate name	Curtis
use the title instead of or in addition to Forename(s) their name	Fiona Claire
Member Reference Number * (as advised by Companies House)	Day Month Year Date of Birth 3 1 0 8 1 9 7 0
Usual Residential Address†† (or registered or principal office address in the case of a	5 Wellington Close
the address shown is a service address for the Post town	
Confidentiality Order granted County / Region	UK W11 2AN
under the provisions of section 723B of the Country Companies Act	England Postcode
1985	I consent to act as a member of the limited liability partnership named on page 1
* Voluntary information	(Please lick this box if consenting to act as a designated member)
Signed	Date
- /	Member to sign and date)
Peers or others known by a title may Surname or Corporate name	
of or in addition to Forename(s)	
of or in addition to Forename(s) their name	
Member Reference Number *	Day Month Year Date of
(as advised by Companies House)	Birth
Usual Residential Address ^{††} (or registered or principal office address in the case of a	
†† Tick this box if the address shown is a service	
address for the beneficiary of a Confidentiality Order granted County / Region	UK Postcode
provisions of section 723B of the Country	
Companies Act 1985 * Voluntary	I consent to act as a member of the limited liability partnership named on page 1
Information	(Please tick this box if consenting to act as a designated member)
Signed	Member to supposed data

Form revised April 2002 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. OC339642

The Registrar of Companies for England and Wales hereby certifies that

13/14 GOLDEN SQUARE 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 on 27th August 2008.



