## LL AP01

## Appointment of member of a Limited Liability Partnership (LLP)



What this form is for You may use this form to appoint an individual as a member of an LLP.

X What this form is NOT for You cannot use the form to appoint a corporate member. To do this, please use form LL AP02 'Appointment of a corporate



		mber of a Limited Liability tnership (LLP)'.	A26 05/01/2010 3: COMPANIES HOUSE	
1	LLP details			
LLP number	O C 3 4 2 8 8 8		Filling in this form Please complete in typescript or in	
LLP name in full	CAPVEST PARTNERS LLP		bold black capitals.	
			All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment			
Date of appointment	$^{d}3$ $^{d}1$ $^{m}1$ $^{m}2$ $^{y}2$ $^{y}0$ $^{y}$	0		
3	New member's details			
Title *	MRS	_	Please provide any previous names which have been used for business purposes in the past 20 years.	
Full forename(s)	PENELOPE KATE			
Surname	BRIANT		Married women do not need to give former names unless previously used for business purposes.	
Former name(s) •		11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	Continue in Section 6 if required.	
Country/State of residence •	UNITED KINGDOM		Country/State of residence This is in respect of your usual	
Date of birth	do   d8	7 <sup>1</sup> 1	residential address as stated in Section 4a.	
Appointment type <b>®</b>	Are you being appointed as a designated member?  Yes  No		Appointment type     Your designation must match the status of the LLP.	
4	New member's service address o			
	Please complete the service address below. the member's usual residential address in S		O Service address  This is the address that will appear on the public record. This does not have to be your usual residential	
Building name/number	100			
Street	PALL MALL		address.  Please state 'The LLP's Registered	
			Office' if your service address is recorded in the LLP's register of	
Post town	LONDON		members as the LLP's registered office.  If you provide your residential	
County/Region	LONDON			
Postcode	S W 1 Y 5 N Q		address here it will appear on the public record.	
Country	UNITED KINGDOM			
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5	Signatures	
	I consent to act as member of the above named LLP.	
New member's signature	X atsut	
Authorising signature	Signature X	
	This form may be signed and authorised by: Designated member, Judicial factor.	
6	Additional former names (continued from Section 3)	
Former names •		• Additional former names Use this space to enter any additional names.

**LL** APO1
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Presenter information	Important 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.	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.	
Contact name TINA PAGE	Where to send     ■	
Company name CAPVEST LTD	You may return this form to any Companies House address, however for expediency we advise you t return it to the appropriate address below:	
Address 100 PALL MALL  Post town   CALDON	For LLPs registered in England and Wales: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff.	
County/Region LONDON  Postrode S W 1 Y 5 N Q  Country LONDON  DX	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).	
O207 389 7995  Checklist  We may return forms completed incorrectly or with information missing.	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.	
Please make sure you have remembered the following:  ☐ The LLP name and number match the information held on the public Register.  ☐ You have provided a correct date of birth.  ☐ You have completed the date of appointment.  ☐ You have completed the appointment type.  ☐ You have indicated if you are a designated member.	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.	
<ul> <li>You have provided both the service address and the usual residential address.</li> </ul>	<i>i</i> Further information	
<ul> <li>Addresses 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.</li> <li>You have included all former names used for business purposes over the last 20 years.</li> <li>You have enclosed a relevant Section 243 application if applying for this at the same time as completing this form.</li> </ul>	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	
<ul> <li>The new member has signed the form.</li> <li>An authorising signature has been given by a designated member.</li> </ul>	forms page on the website at www.companieshouse.gov.uk	