in accordance with Section 9 of the Limited Liability Partnerships Act 2000

## 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 What this form is N You cannot use the fc appoint a corporate n do this, please use fo 'Appointment of a cormember of a Limited Partnership (LLP)'



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	rardership (CE)		
1.	LLP details		
LLP number	O C 3 4 4 5 5 3	→ Filling in this form Please complete in typescript or in	
LLP name in full	Bidwells LLP	bold black capitals	
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	$\begin{bmatrix} d & 0 & \end{bmatrix} \begin{bmatrix} d & 1 & \end{bmatrix} \begin{bmatrix} m & 0 & m & 5 \end{bmatrix} \begin{bmatrix} y & 2 & y & 0 & y & 1 & y & 2 \end{bmatrix}$		
3	New member's details		
Title *	Mr	• Please provide any previous names	
Full forename(s)	Richard	which have been used for business	
	James	purposes in the past 20 years  Married women do not need to give	
Surname	Skeates	former names unless previously used for business purposes.	
Former name(s) •		Continue in Section 6 if required	
Country/State of residence •	ngland Country/State of residen This is in respect of your us		
Date of birth	<sup>d</sup> 2   <sup>d</sup> 6   <sup>m</sup> 0   <sup>m</sup> 7   <sup>y</sup> 1   <sup>y</sup> 9   <sup>y</sup> 6   <sup>y</sup> 3	residential address as stated in Section 4a  OAppointment type Your designation must match the status of the LLP	
Appointment type <b>9</b>	Are you being appointed as a designated member?  Yes  No		
4	New member's service address <sup>o</sup>		
	Please complete the service address below You must also complete the member's usual residential address in Section 4a	O 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 LLP's register of members as the LLP's registered	
Building name/number	Bidwell House		
Street	Trumpington Road		
Post town	Cambridge		
County/Region	Cambridgeshire	office  If you provide your residential	
Postcode	C B 2 9 L D	address here it will appear on the	
Country	England	public record	

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	Signature X	-
Authorising signature	X Para Mullian X  This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	<u> </u>
Former names <b>0</b>		◆ Additional former names Use this space to enter any additional names