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 fi
appoint a corporate r
do this, please use fc
'Appointment of a coi
member of a Limited
Partnership (LLP)'



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	Pa	artnership (LLP)'	COMPANIES HOUSE	
1	LLP details			
LLP number LLP name in full	O C 3 4 5 6 1 9		Filling in this form Please complete in typescript or in bold black capitals	
	Libertas Partners LLP		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment	-		
Date of appointment	^d 1 ^d 0 ^m 1 ^m 2 ^y 2 ^y 0	^y 0		
3	New member's details	· · · · · · · · · · · · · · · · · · ·		
Title *			• Former name(s)	
Full forename(s)	Anthony John Which have been used for purposes in the past 20 y Married women do not not former names unless previous former names for the former names for the former names former names for the former names		Please provide any previous names which have been used for business purposes in the past 20 years	
Surname			Married women do not need to give former names unless previously used for business purposes	
Former name(s) •			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	^d 2 ^d 6 ^m 1 ^m 2 ^y 1 ^y 9	^y 4 ^y 0	residential address as stated in Section 4a	
Appointment type	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 @	· · · · · · · · · · · · · · · · · · ·		
	Please complete the service address below the member's usual residential address in		O Service address This is the address that will appear on the public record. This does not	
Building name/number	c/o Libertas Capital Corporate Finar	nce Limited	have to be your usual residential	
Street	16 Berkeley Street		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	
County/Region			If you provide your residential	
Postcode	W 1 J 8 D Z		address here it will appear on the public record	
Country				
			I	

Appointment of member of a Limited Liability Partnership (LLP) Signatures I consent to act as member of the above named LLP New member's signature X X For and on behalf o Signature Authorising signature X This form may be signed and authorised by Designated member, Judicial factor Additional former names (continued from Section 3) • Additional former names Former names • Use this space to enter any additional names

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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

Contact name Ref TH

Company name David Venus & Company Limited

Address Thames House

Portsmouth Road

Post town Esher

County/Region Surrey

Postcode K T 1 0 9 A D

Country

DX 36318 ESHER

Telephone 01372 465330

Checklist

We may return forms completed incorrectly or with information missing

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
- $\hfill \square$ You have completed the date of appointment
- ☐ You have completed the appointment type
- You have indicated if you are a designated member
 You have provided both the service address and the
- usual residential address

 Addresses must be a physical location. They cannot be a PO Box number funder part of a full convey.
- be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number

 You have included all former names used for
- business purposes over the last 20 years
- You have enclosed a relevant Section 243 application if applying for this at the same time as completing this form
- ☐ The new member has signed the form
- An authorising signature has been given by a designated member

I Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses

Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below

For LLPs registered in England and Wales

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff

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)

For LLPs registered in Northern Ireland

The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG DX 481 N.R Belfast 1

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

7 Further information

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 forms page on the website at www.companieshouse.gov.uk