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 NOT fo You cannot use the form to appoint a corporate member do this, please use form LL 'Appointment of a corporat member of a Limited Liabil Partnership (LLP)'.



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	Partnership (LLP)'.	COMPANIES HOUSE			
1	LLP details				
LLP number	O C 3 4 9 2 2 8	Filling in this form Please complete in typescript or in			
LLP name in full	NOERR LLP	bold black capitals.			
		All fields are mandatory unless specified or indicated by *			
2	Date of member's appointment	* **			
Date of appointment	d 0 d 9				
3	New member's details				
Title *	Dr	• Former name(s) Please provide any previous names			
Full forename(s)	Lutz Detlef	which have been used for business purposes in the past 20 years.			
Surname	Schmidt	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 •	Germany	Ocuntry/State of residence This is in respect of your usual			
Date of birth	d 0 d 1 m 1	residential address as stated in Section 4a.			
Appointment type •	Are you being appointed as a designated member?	• Appointment type			
	Yes	Your designation must match the status of the LLP.			
	✓ No				
4	New member's service address •				
	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			
Building name/number	The LLP's Registered Office	have to be your usual residential address.			
Street		—— Please state 'The LLP's Registered			
		Office' if your service address is			
Post town		recorded in the LLP's register of members as the LLP's registered office.			
County/Region	<u> </u>	If you provide your residential			
Postcode		address here it will appear on the public record.			
Country					

5	Signatures	
	i consent to act as member of the above named LLP.	
New member's ignature	Signature X	\
Authorising signature	Signature X Helili X	
	This form may be signed and authorised by: Designated member, Judicial factor.	-
6	Additional former names (continued from Section 3)	
Former names ①		Additional former names Use this space to enter any additional names.

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Presenter 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. Company Secretarial Dept Smith & Williamson ^{Address} 25 Moorgate London County/Region Postcode Country DX: 119507 Finsbury Square EC2 020 7131 4000 x 8089 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

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, First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS. 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.

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

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	•	e at				

held on the public Register.

usual residential address.

completing this form.

designated member.

☐ You have provided a correct date of birth.

☐ You have completed the appointment type. You have indicated if you are a designated member. ☐ You have provided both the service address and the

You have included all former names used for business purposes over the last 20 years.

☐ You have enclosed a relevant Section 243

The new member has signed the form. An authorising signature has been given by a

☐ You have completed the date of appointment.

☐ 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.

application if applying for this at the same time as