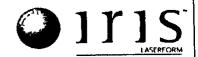
In accordance with Section 9 of the Limited Liability Partnerships Act 2000

## 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 for You cannot use the form to appoint a corporate member do this, please use form LL / 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



A51 03/03/2011 COMPANIES HOUS

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	Partnership (LLP)'	COMPANIES HOUSE
1	LLP details	
LLP number	0 C 3 5 2 0 4 1	→ Filling in this form Please complete in typescript or in
LLP name in full	ALBEMARLE RETAIL PROPERTIES LLP	bold black capitals  All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	12/2 10/2 /2/0/1/1	<u> </u>
3	New member's details	
Title *	MR	Former name(s)     Please provide any previous names
Full forename(s)	MICHAEL	which have been used for business purposes in the past 20 years
		Married women do not need to give former names unless previously used
Surname	WILSON- WRIGHT.	for business purposes
Former name(s) 1		Continue in Section 6 if required
Country/State of residence	IRELAND	Country/State of residence     This is in respect of your usual residential address as stated in Section 4a
Date of birth	12°6 5 11983	
Appointment type 3	Are you being appointed as a designated member?	Appointment type     Your designation must match the status of the LLP
	Yes	
4	New member's service address ©	<u> </u>
	Please complete the service address below You must also complete	Service address
	the member's usual residential address in Section 4a.	This is the address that will appear on the public record. This does not
Building name/number	GREARICAN HOUSE	have to be your usual residential address
Street	COILL DUBH	Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of
Post town	NAAS	members as the LLP's registered office
County/Region	CO. KILDARE	If you provide your residential address here it will appear on the
Postcode		public record
Country	IRELAND	

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	Signature X Mohail Wson Worth - X	
Authorising signature	Signature X  This form must be signed and authorised by a 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

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Presenter information	I 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	☑ Where to send		
Company name Boodle Hatfield	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:		
Address	For LLPs registered in England and Wales: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff		
Post town			
County/Region  Postoode W 1 S 1 D A	For LLPs registered in Scotland: The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF		
Country	DX ED235 Edinburgh 1		
DX DX 53 Chancery Lane LONDON	or LP 4 Edinburgh 2 (Legal Post)		
Telephone 020 7629 7411	For LLPs registered in Northern Ireland:		
Charlina .	The Registrar of Companies, Companies House,		
We may return forms completed incorrectly or with information missing	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  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 (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.	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		