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 To do this, please use form LL AP 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



LD7 19/09/2012 COMPANIES HOUSE

#44

	Partnership (LLP)'	
1	LLP details	
LLP number	0 6 3 5 7 4 6 3	→ Filling in this form Please complete in typescript or in
LLP name in full	PSPF40LLP	bold black capitals
		All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	1 1	
3	New member's details	
Title *	MR	• Former name(s) Please provide any previous names
Full forename(s)	MAURICE	which have been used for business purposes in the past 20 years
		Married women do not need to give
Surname	BENNETT	former names unless previously used for business purposes
Former name(s) •		Continue in Section 6 if required
Country/State of residence •	UNITED KINGDOM	O Country/State of residence This is in respect of your usual
Date of birth	10 5 5 3 1 9 3 4	residential address as stated in Section 4a
Appointment type	Are you being appointed as a designated member?	Appointment type
	✓ Yes I No	Your designation must match the status of the LLP
New member's service address ^o		
	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/numbe	9	have to be your usual residential
Street	INGRAM AVENUE	Please state 'The LLP's Registered
		Office' if your service address is recorded in the LLP's register of
Post town	LONOON	members as the LLP's registered office
County/Region		If you provide your residential
Postcode	NW116T9	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 X X	
Authorising signature	Signature X Thus forward and authorized by Designated member, ludicial factor.	
6	This form may be signed and authorised by Designated member, Judicial factor	
	Additional former names (continued from Section 3)	
Former names Φ		Additional former names Use this space to enter any additional names

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Presenter information Important information Please note that all information on this form You do not have to give any contact information, but if you do it will help Companies House if there is a query will appear on the public record, apart from on the form. The contact information you give will be information relating to usual residential addresses visible to searchers of the public record Contact name 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 County/Region For LLPs registered in Scotland The Registrar of Companies, Companies House, Postcode Fourth floor, Edinburgh Quay 2, Country 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 DX or LP - 4 Edinburgh 2 (Legal Post) Telephone For LLPs registered in Northern Ireland Checklist The Registrar of Companies, Companies House, We may return forms completed incorrectly or First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS with information missing DX 481 N R Belfast 1 Please make sure you have remembered the Section 243 exemption following If you are applying for, or have been granted, a section $\hfill\square$ The LLP name and number match the information 243 exemption, please post this whole form to the held on the public Register different postal address below You have provided a correct date of birth The Registrar of Companies, PO Box 4082, You have completed the date of appointment Cardiff, CF14 3WE You have completed the appointment type You have indicated if you are a designated member ☐ You have provided both the service address and the Further information usual residential address Addresses must be a physical location. They cannot. For further information, please see the guidance notes be a PO Box number (unless part of a full service on the website at www companieshouse gov uk address), DX or LP (Legal Post in Scotland) number or email enquiries@companieshouse gov uk You have included all former names used for business purposes over the last 20 years This form is available in an You have enclosed a relevant Section 243 application if applying for this at the same time as alternative format. Please visit the completing this form forms page on the website at ☐ The new member has signed the form An authoris ng signature has been given by a

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designated member