

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

200018-30



A fee is payable with this form
Please see 'How to pay' on the last page

☒ **What this form is for**
You may use this form to
incorporate a Limited Liability
Partnership

☒ **What this form is NOT**
You cannot use this form
to incorporate a company. I
please use form IN01 'Ap
register a company'

SATURDAY



AB46DNB6

A19	11/09/2010	377
	COMPANIES HOUSE	
A25	07/09/2010	466
	COMPANIES HOUSE	

Part 1 LLP details

→ **Filling in this form**
Please complete in typescript or in
bold black capitals

All fields are mandatory unless
specified or indicated by *

A1

LLP details

Please show the proposed LLP name below

LLP name in full ¹

MASTER MATHS

Name ending ²

☒ LLP/Limited Liability Partnership

For official use

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1 Duplicate names
Duplicate names are not permitted

2 Name ending
You must delete either LLP or Limited
Liability Partnership
If the LLP is situated in Wales and you
chose to have a Welsh ending (PAC or
Partneriaeth Atebolrwydd Cyfyngedig),
please use form LL IN01c

A2

LLP name restrictions ³

Please tick the box only if the proposed LLP name contains sensitive or restricted
words or expressions that require you to seek comments of a government
department or other specified body

☐ I confirm that the proposed company name contains sensitive or restricted
words or expressions and that approval, where appropriate, has been
sought of a government department or other specified body and I attach a
copy of their response

3 LLP name restrictions
A list of sensitive or restricted words
or expressions that require consent
can be found in guidance available
on our website
www.companieshouse.gov.uk

A3

Situation of registered office ⁴

Please tick the appropriate box below that describes the situation of the
proposed registered office (only one box must be ticked)

☒ England and Wales
☐ Wales
☐ Scotland
☐ Northern Ireland

4 Registered office
Every LLP must have a registered
office and this is the address to
which the Registrar will send
correspondence

For England and Wales LLPs, the
address must be in England or Wales.

For Welsh, Scottish or Northern
Ireland LLPs, the address must be in
Wales, Scotland or Northern Ireland
respectively

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A4

Registered office address ①

Please give the registered office address of your LLP

Building name/number

29

Street

BARRASFORD ROAD

Post town

DURHAM

County/Region

DURHAM

Postcode

DH1 5NB

① Registered office address

You must ensure that the address shown in this section is consistent with the situation indicated in section A3

You must provide an address in England or Wales for LLPs to be registered in England and Wales

You must provide an address in Wales, Scotland or Northern Ireland for LLPs to be registered in Wales, Scotland or Northern Ireland respectively

A5

Members' designation

Will all members from time to time be designated members? ②

☒ Yes

☐ No

② Members' designation

If 'Yes' all members named will be designated. If 'No' at least two members named must be designated

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Part 2**Proposed officers**

- For a member who is an individual, go to Section B1.
→ For a corporate member, go to Section C1.

There must be two designated members at all times. Unless there are at least two designated members all members will be designated.

Member**B1****Member appointments ①**

Please use this section to list all the member appointments taken on formation
For a corporate member complete C1-C5

Title*	DR
Full forename(s)	OLCA
Surname	ANOSOVA
Former name(s) ②	
Country/State of residence ③	UK
Date of birth	^d 1 ^m 3 ^y 1978
Designated member ④	Please tick this box if you are consenting to act as a designated member <input checked="" type="checkbox"/>

① Appointments

For corporate member appointments, please complete section C1-C5 instead of section B

② Former name(s)

Please provide any previous names which have been used for business purposes in the last 20 years
Married women do not need to give former names unless previously used for business purposes.

③ Country/State of residence

This is in respect of your usual residential address as stated in Section B4

④ Designated member

There must be at least two designated members at all times

Additional appointments

If you wish to appoint more members, please use the 'Member appointments' continuation page

B2**Member's service address ⑤**

Please complete the service address below You must also fill in the member's usual residential address in Section B4.

Building name/number	29
Street	BARRASFORD ROAD
Post town	DURHAM
County/Region	DURHAM
Postcode	DH1 5MB
Country	UK

⑤ Service address

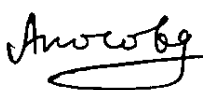
This is the address that will appear on the public record This does not have to be your usual residential address

Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of members' particulars as the LLP's registered office

If you provide your residential address here it will appear on the public record

B3**Signature ⑥**

I consent to act as member of the proposed LLP named in Section A1

Signature	Signature X  (O ANOSOVA) X
-----------	--

⑥ Signature

The person named above consents to act as member of the proposed LLP

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Member

B1 Member appointments ①

Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5																	
Title*	DR																
Full forename(s)	VITALITY																
Surname	KURLIN																
Former name(s) ②																	
Country/State of residence ③	UK																
Date of birth	<table border="1"><tr><td>d</td><td>2</td><td>d</td><td>6</td><td>m</td><td>1</td><td>m</td><td>0</td><td>y</td><td>1</td><td>y</td><td>9</td><td>y</td><td>7</td><td>y</td><td>8</td></tr></table>	d	2	d	6	m	1	m	0	y	1	y	9	y	7	y	8
d	2	d	6	m	1	m	0	y	1	y	9	y	7	y	8		
Designated member ④	Please tick this box if you are consenting to act as a designated member <input checked="" type="checkbox"/>																

① Appointments

For corporate member appointments, please complete section C1-C5 instead of Section B

② Former name(s)

Please provide any previous names which have been used for business purposes in the last 20 years. Married women do not need to give former names unless previously used for business purposes

③ Country/State of residence

This is in respect of your usual residential address as stated in section B4

④ Designated member

There must be at least two designated members at all times

Additional appointments

If you wish to appoint more members, please use the 'Member appointments' continuation page

B2 Member's service address ⑤

Please complete the service address below You must also fill in the member's usual residential address in Section B4									
Building name/number	29								
Street	BARRASFORD ROAD								
Post town	DURHAM								
County/Region	DURHAM								
Postcode	<table border="1"><tr><td>D</td><td>H</td><td>1</td><td></td><td>5</td><td>N</td><td>B</td><td></td></tr></table>	D	H	1		5	N	B	
D	H	1		5	N	B			
Country	UK								

⑤ 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 will be recorded in the LLP's register of members' particulars as the LLP's registered office

If you provide your residential address here it will appear on the public record

B3 Signature ⑥

I consent to act as member of the proposed LLP named in Section A1						
Signature	<table border="1"><tr><td>Signature</td><td><table border="1"><tr><td>X</td><td>ISKYNA (V. KURLIN)</td><td>X</td></tr></table></td></tr></table>	Signature	<table border="1"><tr><td>X</td><td>ISKYNA (V. KURLIN)</td><td>X</td></tr></table>	X	ISKYNA (V. KURLIN)	X
Signature	<table border="1"><tr><td>X</td><td>ISKYNA (V. KURLIN)</td><td>X</td></tr></table>	X	ISKYNA (V. KURLIN)	X		
X	ISKYNA (V. KURLIN)	X				

⑥ Signature

The person named above consents to act as member of the proposed LLP

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Part 3

Signature

I certify that I am a

- Solicitor engaged in the formation of this LLP
- Member named of this LLP

and that two or more persons named in this form are associated for carrying on lawful business with a view to profit

I am signing this form on behalf of the LLP

Signature

Signature

X *JKyrne* (V. KURLIN) X

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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

Contact name **DR VITALIY KURLIN**

Company name **MASTER MATHS**

Address **29 BARRASFORD ROAD**

Post town **DURHAM**

County/Region **DURHAM**

Postcode **DH1 5NB**

Country **UK**

DX

Telephone **0779 404 18 69**



Certificate

We will send your certificate to the presenters address (shown above) or if indicated to another address shown below

☐ At the registered office address (Given in Section A4)



Checklist

We may return forms completed incorrectly or with information missing

Please make sure you have remembered the following.

- ☒ You have checked that the proposed LLP name is available and the various rules that may affect your choice of name. More information can be found in guidance on our website
- ☐ If the name of the company is the same as one already on the register as permitted by The Company and Business Names (Miscellaneous Provisions) Regulations 2008, please attach consent
- ☒ You have used the correct appointment section
- ☒ Any addresses given 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
- ☒ There are at least two designated members
- ☒ The document has been signed, where indicated
- ☒ You have enclosed the correct fee
- ☒ All relevant attachments have been included



Important information

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



How to pay

A fee of £20 is payable to Companies House to incorporate an LLP

Make cheques or postal orders payable to 'Companies House'



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



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



FILE COPY

**CERTIFICATE OF INCORPORATION
OF A
LIMITED LIABILITY PARTNERSHIP**

Partnership No. OC357897

The Registrar of Companies for England and Wales hereby certifies that

MASTER MATHS LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited and the situation of the registered office is in England/Wales.

Given at Companies House on 14th September 2010.



Companies House
— for the record —



THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES