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

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)



09/05/2013

COMPANIES HOUSE *A200WMZC*

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What this form is for You may use this form to appoint an individual as a member of an LLP

What this form is You cannot use the appoint a corporate do this, please use t 'Appointment of a co member of a Limite

	Partnership (LLP)'	Jam / III /
1	LLP details	
LLP number	06361181	Please complete in typescript or in bold black capitals. All fields are mandatory unless specified or indicated by *
CLF Haine III Iun	HIGHGROVE SECURITIES UP	
2	Date of member's appointment	
Date of appointment	126 77 12/0/12	
3	New member's details	
Title *	mR.	• Former name(s)
Full forename(s)	RUSSELL LUKE TIMOTHY.	Please provide any previous names which have been used for business purposes in the past 20 years.
Surname	CusAcK.	Marned 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 Output Description:	UK.	Country/State of residence This is in respect of your usual
Date of birth	114 01 1/965	residential address as stated in Section 4a
Appointment type	Are you being appointed as a designated member?	Appointment type
	Yes No	Your designation must match the status of the LLP
4	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	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.
Building name/number	2 PATEMAN CLOSE	
Street	RUCKIAS HAM	
		Office' if your service address is
Post town	Dide Allaca	recorded in the LLP's register of

members as the LLP's registered office.

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

County/Region

Postcode

Country

LL APO1 Appointment of member of a Limited Liability Partnership (LLP)

5	Signatures	
	I consent to act as member of the above named LLP.	
New member's signature	Signature X	
Authorising signature	Signature X This form may be signed and authorised by 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.