In accordance with Section 2 of the Limited Liability Partnership Act 2000 and the relevant provisions of the Companies Act 2006 as applied to Limited Liability Partnerships

LL IN01

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



001179/200

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 f You cannot use this form t incorporate a company To please use form IN01 'App, register a company'



A44 26/01/2011 COMPANIES HOUSE 179

		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	Duplicate names Duplicate names are not permitted
LLP name in full •	WEYNO CAPITAL LLP	Name ending
		You must delete either LLP or Limited Liability Partnership
Name ending 💇	LLP/ Limited Liability Partnership.	If the LLP is situated in Wales and you chose to have a Welsh ending (PAC or
For official use		Partneriaeth Atebolrwydd Cyfyngedig), please use form LL IN01c
A2	LLP name restrictions o	-
	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	● 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 o	
	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	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 o	
	Please give the registered office address of your LLP	• Registered office address You must ensure that the address
Building name/number	CORNWALL BUILDINGS	shown in this section is consistent with the situation indicated in
Street	45-51 NEWHALL STREET	section A3
	OFFICE 330	You must provide an address in England or Wales for LLPs to be
Post town	BIRMINGHAM	registered in England and Wales
County/Region		You must provide an address in Wales, Scotland or Northern Ireland
Postcode	B 3 Q R	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? ✓ Yes	Members' designation If 'Yes' all members named will
	□ No	be designated If 'No' at least two members named must be designated

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Signature

Somature

X

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

Proposed officers Part 2 → 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 o Please use this section to list all the member appointments taken on formation Appointments For corporate member appointments, For a corporate member complete C1-C5 please complete section C1-C5 instead of section B Title* Former name(s) Full forename(s) Please provide any previous names which have been used for business Surname purposes in the last 20 years Married women do not need to give Former name(s) @ former names unless previously used for business purposes O Country/State of residence Country/State of This is in respect of your usual residence 6 residential address as stated in Date of birth Section B4 Designated member Designated member @ Please tick this box if you are consenting to act as a 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 6 Please complete the service address below You must also fill in the member's Service address usual residential address in Section B4 This is the address that will appear on the public record. This does not Building name/number have to be your usual residential Street Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of Post town members' particulars as the LLP's registered office County/Region If you provide your residential Postcode address here it will appear on the public record Country В3 Signature o I consent to act as member of the proposed LLP named in Section A1 Signature The person named above consents

proposed LLP

X

to act as member of the

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

Member

Full forename(s) Full forename(s) Full forename(s) Former name(s) Flease provide any previous name which have been used for busin purposes in the last 20 years Marined women do not need to former names unless previously for business purposes Country/State of residence The sin respect of your usual residential address as stated in section B4 Please tick this box if you are consenting to act as a designated member There must be at least two designated members at all time Additional appointments flyou wish to appoint more members, please use the 'Menta appointments' flyou wish to appoint more members, please use the 'Menta appointments' continuation page to the suppointments' suppointments' suppointments' suppointments' continuation page to be your usual residential address in Section B4 Building name/number Street Flease state 'The LLP's Registere office if you provide your result residential address be in the LLP's registere member's particulars as the LLP registered office. Flease state 'The LLP's Registere office if you provide your residential address here it will appear on it public record Flease tree it will appear on it public record. Signature Flease tree it will appear on the public record. Signature The person named above conse	B1	Member appointments •	
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Flease provide any previous hat which have been used for busing purposes in the last 20 years. Married women do not need to former name(s) Country/State of residence Date of birth	Title*		
Former name(s) Country/State of residence Date of birth Designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please complete the service address Please complete the service address Please complete the service address below You must also fill in the member's usual residential address in Section B4 Building name/number Street Building name/number Street Signature Signature Osignature Osignature Cosignature Cosignature Cosignature Cosignature Cosignature Cosignature Cosignature Cosignature Country/State of residence This is in respect of your usual residential address sate the Member at all time Additional appointments If you wish to appoint more Member's service address Designated member Cosignature Cosigna			Please provide any previous names which have been used for business
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Designated member Please tick this box if you are consenting to act as a designated member There must be at least two designated members at all time Additional appointments If you wish to appoint more members, please use the 'Memi appointments' continuation page Please complete the service address below You must also fill in the member's usual residential address in Section B4 Building name/number Street Post town County/Region Postcode Country B3 Signature Potential address Signature Potential address below You must also fill in the member's this is the address that will appear on the public record This does in have to be your usual residential address where your usual residential address as the LIP registered office. If you provide your residential address here it will appear on the public record This does in have to be your usual residential address where the proposed LIP named in Section A1 Signature Signature Signature Signature Signature Signature OSignature The person named above conset to act as member of the proposed LIP named in Section A1 Description where the site and the signature of the proposed LIP named in Section A1 Signature	residence 🛛	d d m m y y y	This is in respect of your usual residential address as stated in
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Post town County/Region Postcode Country Signature The person named above conse to act as member of the propose	Jucet		Please state 'The LLP's Registered Office' if your service address will
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I consent to act as member of the proposed LLP named in Section A1 Signature The person named above conse to act as member of the proposed to act			
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Signature to act as member of the propos		I consent to act as member of the proposed LLP named in Section A1	
\mathbf{x}	Signature	Signature	to act as member of the proposed
		×	

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Corporate member

C1	Corporate member appointments Output Description:	
	Please use this section to list all the corporate members of the LLP	• Registered or principal address
Name of corporate body or firm	SYTEN GROUP LIMITED	This is the address that will appear on the public record. This address
about of firm		must be a physical location for the delivery of documents. It cannot be
Building name/number		a PO box number (unless contained within a full address), DX number or
Street	Ajeltake Road, Ajeltake Island	LP (Legal post in Scotland) number Designated member
	Trust Company Complex	There must be at least two
Post town	Majuro	designated members at all times Additional appointments
County/Region		If you wish to appoint more than one
Postcode	M H 9 6 9 6 0	corporate member, please use the 'Corporate member appointments'
Country	Marshall Islands	continuation page
Designated member •	Please tick this box if you are consenting to act as a designated member	
C2	Location of the registry of the corporate body or firm	
	Is the corporate director registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3	EEA companies 9	
	Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register	● EEA A full list of countries of the EEA can be found in our guidance
Where the company/ firm is registered •		www.companieshouse.gov.uk
Registration number		O This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC)
C4	Non-EEA companies	1
	Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	Non-EEA Where you have provided details of the register (including state) where the company or firm is registered,
Legal form of the corporate body or firm	Limited company	you must also provide its number in that register
Governing law	Marshall Islands Business Corporations Act	
If applicable, where the company/firm is registered 9	Office of the Registrar of Corporations, Marshall Islands	
If applicable, the registration number	24795	
C 5	Signature o	***
	I consent to act as member of the proposed LLP named in Section A1	O Signature The person named above consents
Signature	* Cambal X	to act as corporate member of the proposed LLP

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

Corporate member

C1	Corporate member appointments•	
	Please use this section to list all the corporate members of the LLP	• Registered or principal address This is the address that will appear on the public record This address must be a physical location for the
Name of corporate body or firm	PINTOX SYSTEMS LIMITED	
Building name/number		delivery of documents it cannot be a PO box number (unless contained within a full address), DX number or
Street	Ajeltake Road, Ajeltake Island	LP (Legal post in Scotland) number
	Trust Company Complex	② Designated member There must be at least two
Post town	Majuro	designated members at all times.
County/Region		Additional appointments If you wish to appoint more than one
Postcode	M H 9 6 9 6 0	corporate member, please use the 'Corporate member appointments'
Country	Marshall Islands	continuation page
Designated member 9	Please tick this box if you are consenting to act as a designated member	
C2	Location of the registry of the corporate body or firm	
	Is the corporate director registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3	EEA companies •	
	Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register	● EEA A full list of countries of the EEA can be found in our guidance
Where the company/ firm is registered •		www.companieshouse.gov.uk
Registration number		This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC)
C4	Non-EEA companies	
	Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	Non-EEA Where you have provided details of the register (including state) where the company or firm is registered
Legal form of the corporate body or firm	Limited company	you must also provide its number in that register
Governing law	Marshall Islands Business Corporations Act	
If applicable, where the company/firm is registered 9	Office of the Registrar of Corporations, Marshall Islands	
If applicable, the registration number	24797	
C5	Signature o	
	I consent to act as member of the proposed LLP named in Section A1	Signature The person named above consents
Signature	X Museum X	to act as corporate member of the proposed LLP
		CHFP000 10/09 Version 2.1

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

Part 3	Signature
	I certify that I am a
	Solicitor engaged in the formation of this LLPMember 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	X amba X



FILE COPY

CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership No. OC361263

The Registrar of Companies for England and Wales hereby certifies that

WEYNO CAPITAL 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 27th January 2011.



