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 fo You cannot use the form to appoint a corporate memb do this, please use form Li 'Appointment of a corpora member of a Limited Liability Partnership (LLP)'



02/03/2011 COMPANIES HOUSE

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	Partnership (LLP)'		
1	LLP details		
LLP number	0 9 6 1 9 1 3	→ Filling in this form Please complete in typescript or in	
LLP name in full	66 ROKESLY AVENUE LIMITED	bold black capitals  All fields are mandatory unless specified or indicated by *	
	LIABILITY PARTNERSHIP		
2	Date of member's appointment	·	
Date of appointment			
3	New member's details		
Title *		Former name(s)     Please provide any previous names	
Full forename(s)	ZENNY	which have been used for business purposes in the past 20 years  Married women do not need to give former names unless previously used for business purposes.	
Surname	NEOPHYTOU neé HANSFORD		
Former name(s) •		Continue in Section 6 if required	
Country/State of residence •	114	Country/State of residence This is in respect of your usual residential address as stated in Section 4a	
Date of birth	1/16 TT 1/10/16/5		
Appointment type 9	Are you being appointed as a designated member?  Yes	Appointment type     Your designation must match the status of the LLP	
	□ No		
4	New member's service address <sup>©</sup>		
	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	
Building name/number	1	have to be your usual residential	
Street	EUA ROAD	Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of members as the LLP's registered office If you provide your residential	
Post town	CONDON		
County/Region			
Postcode	N8 964	address here it will appear on the public record	
Country			

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

Signatures	
I consent to act as member of the above named LLP	
Signature X	
Signature X	
This form may be signed and authorised by Designated member, Judicial factor.	
Additional former names (continued from Section 3)	
	Additional former names     Use this space to enter     any additional names.
	Signature  X  Signature  X  This form may be signed and authorised by Designated member, Judicial factor.

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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 PETER BROWN
Company name PETER BROWN & CO
SOLICITORS UP
FIRST FLOOR OFFICES
COMER HOUSE
19 STATION ROAD
POST LOWIN BARNET
County/Region HERTS
Postcode ENS 185
Country
" 47706 NEW BARNET
0208 447 3277
Charklist

We may return forms completed incorrectly or with information missing

#### 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

#### Important information

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

#### 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, First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS 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