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

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LLP details

Filling in this form LLP number Please complete in typescript or in bold black capitals LLP name in full All fields are mandatory unless specified or indicated by " Date of member's appointment 04 Date of appointment New member's details 3 O Former name(s) MR Title 1 Please provide any previous names PETER which have been used for business Full forename(s) ANDREW purposes in the past 20 years Married women do not need to give former names unless previously used Surname for business purposes Former name(s) • Continue in Section 6 if required Country/State of O Country/State of residence residence @ This is in respect of your usual residential address as stated in Date of birth Section 4a Appointment type Are you being appointed as a designated member? Appointment type Your designation must match the Yes Yes status of the LLP ☐ No New member's service address @ O Service address Please complete the service address below You must also complete This is the address that will appear the member's usual residential address in Section 4a on the public record. This does not Building name/number REGIMEN OFFICE have to be your usual residential Street Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of Post town members as the LLP's registered County/Region If you provide your residential Postcode address here it will appear on the public record Country

## II APO1

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X X	
Authorising signature	This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names •	Additional former maines (continued non-section s)	Additional former names     Use this space to enter     any additional names

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Presenter information	Important 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.	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses	
Contact name	☑ Where to send	
Company name	You may return this form to any Companies Hous address, however for expediency we advise you to return it to the appropriate address below	
Address	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ	
Post town	DX 33050 Cardiff	
Country  Postcode  Country  DX	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)	
Telephone		
We may return forms completed incorrectly or with information missing	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	
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	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	
<ul> <li>You have provided both the service address and the usual residential address</li> </ul>	<i>i</i> Further information	
<ul> <li>□ 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.</li> <li>□ You have included all former names used for business purposes over the last 20 years.</li> <li>□ You have enclosed a relevant Section 243 application if applying for this at the same time as completing this form.</li> <li>□ The new member has sugged the form.</li> </ul>	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	
☐ The new member has signed the form ☐ An authorising signature has been given by a designated member	forms page on the website at www.companieshouse.gov.uk	