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 for You cannot use the form to appoint a corporate member do this, please use form LLAI 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



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	Partnership (LLP)	COMPANIES HOUSE
1	LLP details	
LLP number	0 6 3 7 7 6 8 3	→ Filling in this form Please complete in typescript or in bold black capitals
LLP name in full	CAVENDISH LEGAL GROUP LLP	
		All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	10 0 72 72 72	
3	New member's details	
Title *	MR	O Former name(s) Please provide any previous names
Full forename(s)	DAVID	which have been used for business purposes in the past 20 years
Surname	TJRNER	Married women do not need to give former names unless previously used
Former name(s) •	Jacker	for business purposes
Country/State of residence 9	UK	Continue in Section 6 if required Country/State of residence This is in respect of your usual
Date of birth	15 10 1456	residential address as stated in Section 4a
Appointment type	Are you being appointed as a designated member? Ves No	O Appointment type 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	OService address This is the address that will appear on the public record This does not
Building name/number		have to be your usual residential address 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 address here it will appear on the public record
Street	The UP's Registered Office	
Post town		
County/Region		
Postcode		
Country		

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5	Signatures	
	I consent to act as member of the above named LLP	•
New member's signature	Signature X	- (
Authorising signature	Signature X Ndelit .	(
	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
		- -
		- -
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Presenter information	! Important
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 will appear on th information relat addresses
Contact name	✓ Where to s
Company name	You may return t address, howeve return it to the a
Address	For LLPs registers England and Wal The Registrar of Co Crown Way, Cardif
Post town	DX 33050 Cardiff
County/Region Posicode Country DX	For LLPs register The Registrar of Co Fourth floor, Edinb 139 Fountainbridg DX ED235 Edinbur
Telephone	or LP - 4 Edinburgi
✓ Checklist We may return forms completed incorrectly or with information missing	For LLPs register Northern Ireland The Registrar of Co First Floor, Waterfr Belfast, Northern
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	Section 243 exert If you are applying 243 exemption, pludifferent postal action The Registrar of C Cardiff, CF14 3WE
☐ You have indicated if you are a designated member☐ You have provided both the service address and the	i Further in
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	For further information the website at or email enquiries
business purposes over the last 20 years ☐ You have enclosed a relevant Section 243	This form is
application if applying for this at the same time as	alternative
completing this form The new member has signed the form An authorising signature has been given by a designated member	forms page www.comp

ınformation

all information on this form ie public record, apart from ing to usual residential

end

this form to any Companies House r for expediency we advise you to ppropriate address below

ed in

ompanies, Companies House, ff, Wales, CF14 3UZ

ed in Scotland

ompanies, Companies House, urgh Quay 2, e, Edinburgh, Scotland, EH3 9FF rgh 1 h 2 (Legal Post)

ed in

ompanies, Companies House, ront Plaza, 8 Laganbank Road, Ireland, BT1 3BS st 1

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g for, or have been granted, a section lease post this whole form to the ddress below ompanies, PO Box 4082,

formation

ation, please see the guidance notes www.companieshouse.gov.uk @companieshouse gov uk

available in an format. Please visit the on the website at anieshouse.gov.uk