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 LL A 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



.05 24/05/2013

#178

Date of member's appointment Date of appointment Date of appointment Title * Full forename(s) Surname BRASSE Y Former name(s) Country/State of residence O Date of birth Are you being appointed as a designated member? Test No 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 Building name/number	filling in this form lease complete in typescript or in hold black capitals All fields are mandatory unless
Date of member's appointment Date of appointment Date of appointment Title * Full forename(s) Surname BRASSE Y Former name(s) Country/State of residence O Date of birth Are you being appointed as a designated member? Test No 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 Building name/number	Please complete in typescript or in oold black capitals
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Full forename(s) ALEXIS NIAL Surname BRASSE Y Former name(s) Country/State of residence Date of birth Appointment type Are you being appointed as a designated member? No New member's service address Please complete the service address below You must also complete the member's usual residential address in Section 4a	Former name(s) Please provide any previous names
Former name(s) © Country/State of residence © Date of birth 2 2 0 8 1 4 2 Are you being appointed as a designated member? Ves No New member's service address © Please complete the service address below You must also complete the member's usual residential address in Section 4a	which have been used for business purposes in the past 20 years
Former name(s) • Country/State of residence • Date of birth Appointment type • New member's service address • Please complete the service address below You must also complete the member's usual residential address in Section 4a	Married women do not need to give
Country/State of residence Date of birth	former names unless previously used for business purposes
Date of birth Are you being appointed as a designated member? Please complete the service address below You must also complete the member's usual residential address in Section 4a Building name/number Building name/numb	Continue in Section 6 if required
Date of birth Appointment type Are you being appointed as a designated member? No New member's service address Please complete the service address below You must also complete the member's usual residential address in Section 4a Building name/number	Country/State of residence This is in respect of your usual
A New member's service address • Please complete the service address below You must also complete the member's usual residential address in Section 4a Building name/number	residential address as stated in Section 4a
A New member's service address • Please complete the service address below You must also complete the member's usual residential address in Section 4a Building name/number	Appointment type
A 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 Building name/number	Your designation must match the status of the LLP
Please complete the service address below You must also complete the member's usual residential address in Section 4a Building name/number	
the member's usual residential address in Section 4a Building name/number	
Building name/number	Service address This is the address that will appear on the public record. This does not
	have to be your usual residential address
ine LP's Voaistered Othic	Please state 'The LLP's Registered
Street The UP's Rogistered Office	Office' if your service address is recorded in the LLP's register of
Post town	members as the LLP's registered office
County/Region	If you provide your residential
Postcode	address here it will appear on the public record
Country	•

Appointment of member of a Limited Liability Partnership (LLP) Signatures I consent to act as member of the above named LLP New member's signature Signature X Authorising signature This form may be signed and authorised by Designated member, Judicial factor Additional former names (continued from Section 3) Former names O 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 Address	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below
Post town	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff
County/Region 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	For LLPs registered in
We may return forms completed incorrectly or with information missing	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
 You have provided both the service address and the usual residential address 	<i>i</i> Further information
 □ 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. 	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
 An authorising signature has been given by a designated member 	www.companieshouse.gov.uk

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