

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

014040/80  
**LL IN01**

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



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**  
You cannot use this form  
to incorporate a company  
please use form IN01 'A  
register a company'

THURSDAY



A09 13/09/2012 #348  
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

LLP name in full \*

**TASOS ENTERPRISES**

Name ending \*

LLP/Limited Liability Partnership

For official use

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❶ **Duplicate names**  
Duplicate names are not permitted

❷ **Name ending**  
You must delete either LLP or Limited  
Liability Partnership  
If the LLP is situated in Wales and you  
chose to have a Welsh ending (PAC or  
Partneriaeth Atebolrwydd Cyfyngedig),  
please use form LL IN01c

#### A2 LLP name restrictions \*

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

❸ **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](http://www.companieshouse.gov.uk)

#### A3 Situation of registered office \*

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

❹ **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

# LL IN01

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

<b>A4</b>	<b>Registered office address ①</b>	
	Please give the registered office address of your LLP	
Building name/number	MINSHULL HOUSE/67	<b>① Registered office address</b> You must ensure that the address shown in this section is consistent with the situation indicated in section A3  You must provide an address in England or Wales for LLPs to be registered in England and Wales  You must provide an address in Wales, Scotland or Northern Ireland for LLPs to be registered in Wales, Scotland or Northern Ireland respectively
Street	WELLINGTON ROAD NORTH	
Post town	STOCKPORT	
County/Region	CHESHIRE	
Postcode	S K 4 2 L P	

<b>A5</b>	<b>Members' designation</b>	
	Will all members from time to time be designated members? ②	
	<input checked="" type="checkbox"/> Yes	<b>② Members' designation</b> If 'Yes' all members named will be designated. If 'No' at least two members named must be designated
	<input type="checkbox"/> No	

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**Part 2****Proposed officers**

- 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 ①**

Please use this section to list all the member appointments taken on formation  
 For a corporate member complete C1-C5.

Title*	
Full forename(s)	ANGELIQUE ELIZABETH
Surname	LILLEY
Former name(s) ②	
Country/State of residence ③	NEW ZEALAND
Date of birth	d 1 0 m 0 4 y 1 9 7 8
Designated member ④	Please tick this box if you are consenting to act as a <b>designated</b> member <input checked="" type="checkbox"/>

- ① Appointments**  
 For corporate member appointments, please complete section C1-C5 instead of section B
- ② Former name(s)**  
 Please provide any previous names which have been used for business purposes in the last 20 years  
 Married women do not need to give former names unless previously used for business purposes
- ③ Country/State of residence**  
 This is in respect of your usual residential address as stated in Section B4
- ④ 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 ⑤**

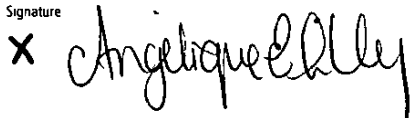
Please complete the service address below You must also fill in the member's usual residential address in **Section B4**.

Building name/number	THE LLP's REGISTERED OFFICE
Street	
Post town	
County/Region	
Postcode	
Country	

- ⑤ Service address**  
 This is the address that will appear on the public record This does not have to be your usual residential address
- Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of members' particulars as the LLP's registered office
- If you provide your residential address here it will appear on the public record

**B3****Signature ⑥**

I consent to act as member of the proposed LLP named in **Section A1**.

Signature	Signature 
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- ⑥ Signature**  
 The person named above consents to act as member of the proposed LLP

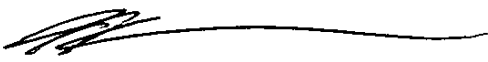
LL IN01

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

## Member

<b>B1</b>	<b>Member appointments ①</b>	
	Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5.	
Title*		<b>① Appointments</b> For corporate member appointments, please complete section C1-C5 instead of Section B  <b>② Former name(s)</b> Please provide any previous names which have been used for business purposes in the last 20 years Married women do not need to give former names unless previously used for business purposes  <b>③ Country/State of residence</b> This is in respect of your usual residential address as stated in section B4  <b>④ Designated member</b> There must be at least two designated members at all times.  <b>Additional appointments</b> If you wish to appoint more members, please use the 'Member appointments' continuation page
Full forename(s)	RACHEL AMY	
Surname	ERICKSON	
Former name(s) ②		
Country/State of residence ③	AUSTRALIA	
Date of birth	<div>1</div> <div>2</div> <div>0</div> <div>9</div> <div>1</div> <div>5</div> <div>8</div> <div>2</div>	
Designated member ④	Please tick this box if you are consenting to act as a designated member <input checked="" type="checkbox"/>	

<b>B2</b>	<b>Member's service address ⑤</b>	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	
Building name/number	THE LLP's REGISTERED OFFICE	<b>⑤ Service address</b> This is the address that will appear on the public record This does not have to be your usual residential address  Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of members' particulars as the LLP's registered office  If you provide your residential address here it will appear on the public record
Street		
Post town		
County/Region		
Postcode		
Country		

<b>B3</b>	<b>Signature ⑥</b>	
	I consent to act as member of the proposed LLP named in Section A1.	
Signature	Signature <div>X  X</div>	<b>⑥ Signature</b> The person named above consents to act as member of the proposed LLP

## LL IN01

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### Part 3

### Signature

I certify that I am a

- Solicitor engaged in the formation of this LLP
- Member 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

Signature

X

Angelique & Oiley

X

# LL IN01

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



### 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

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone



### Certificate

We will send your certificate to the presenters address (shown above) or if indicated to another address shown below

☐ At the registered office address (Given in Section A4)



### Checklist

We may return forms completed incorrectly or with information missing

Please make sure you have remembered the following

- ☐ You have checked that the proposed LLP name is available and the various rules that may affect your choice of name. More information can be found in guidance on our website
- ☐ If the name of the company is the same as one already on the register as permitted by The Company and Business Names (Miscellaneous Provisions) Regulations 2008, please attach consent
- ☐ You have used the correct appointment section
- ☐ Any addresses given 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
- ☐ There are at least two designated members
- ☐ The document has been signed, where indicated
- ☐ You have enclosed the correct fee
- ☐ All relevant attachments have been included



### Important information

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



### How to pay

A fee of £20 is payable to Companies House to incorporate an LLP

Make cheques or postal orders payable to 'Companies House'



### 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](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.companieshouse.gov.uk)



**FILE COPY**

**CERTIFICATE OF INCORPORATION  
OF A  
LIMITED LIABILITY PARTNERSHIP**

Partnership No. OC378488

The Registrar of Companies for England and Wales hereby certifies that

**TAGOS ENTERPRISES 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 17th September 2012.



*Companies House*  
— for the record —



THE OFFICIAL SEAL OF THE  
REGISTRAR OF COMPANIES