In accordance with Section 9 of the Limited Liability Partnerships Act 2000

## LL AP01

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



Companies House

What this form is for
You may use this form
to appoint an individual as a
member of an ELP

What this form is NOT
You cannot use the form
appoint a corporate men
do this, please use form
'Appointment of a corpor
member of a Limited Liab.



RM

A07

29/01/2015

44

COMPANIES HOUSE

**COMPANIES HOUSE** 

"A3Z515E2" 15/01/2015

#354

Please complete in type of the service address of the late of the	evious names d for business 20 years ot need to give previously used	
Please complete in type of the service address of the late of the	evious names d for business 20 years ot need to give previously used	
Date of member's appointment  Date of appointment    d   d   d   d   d   d   d   d   d	evious names d for business 20 years ot need to give previously used	
New member's details  Title * Mr  Full forename(s)  Andrew William  Surname  Leach  Country/State of residence ●  Date of birth  Appointment type ●  Are you being appointed as a designated member?  Yes  Value of the past 2 of	d for business 20 years ot need to give previously used	
New member's details  Title *   Mr	d for business 20 years ot need to give previously used	
Full forename(s)  Andrew William  Surname  Leach  Former name(s)  Country/State of residence  Date of birth  Appointment type  Are you being appointed as a designated member?  Yes  No  New member's service address  Please provide any	d for business 20 years ot need to give previously used	
Full forename(s)  Andrew William  Surname  Leach  Former name(s)  Country/State of residence  Date of birth  Appointment type  Are you being appointed as a designated member?  Yes  No  New member's service address  Please provide any prowhich have been used purposes in the past 2  Married women do not former names unless in for business purposes.  Continue in Section 6  Country/State of residence  This is in respect of your residential address as Section 4a  Appointment type  Are you being appointed as a designated member?  New member's service address  Please complete the service address  Please complete the service address below You must also complete  Pservice address	d for business 20 years ot need to give previously used	
Full forename(s)  Andrew William  Surname  Leach  Former name(s)  Country/State of residence  Date of birth  Appointment type  Are you being appointed as a designated member?  Yes  No  New member's service address  Please complete the service address below You must also complete  Which have been used purposes in the past 2  Married women do not former names unless por posses. Continue in Section 6  Country/State of residence  This is in respect of your residential address as Section 4a  Appointment type  Yes  Vour designation must status of the LLP  Please complete the service address Please complete  According to the past 2  Married women do not former names unless purposes. Continue in Section 6  Country/State of residence  This is in respect of your residential address as Section 4a  Appointment type  Your designation must status of the LLP	d for business 20 years ot need to give previously used	
Surname  Former name(s) ●  Country/State of residence ●  Date of birth  Appointment type ●  Are you being appointed as a designated member?  Yes  No  New member's service address ●  Please complete the service address below You must also complete  former names unless for business purposes  Continue in Section 6  Country/State of residence ●  This is in respect of your residential address as Section 4a  Appointment type ●  Yes  Your designation must status of the LLP  Service address  Please complete the service address below You must also complete	previously used	
Former name(s)  Country/State of residence  United Kingdom  Date of birth  Appointment type  Are you being appointed as a designated member?  Yes  No  New member's service address  Please complete the service address below You must also complete  Continue in Section 6  Please in Section 4  Appointment type of the service address as section 4a  Appointment type Your designation must status of the LLP  Service address  Service address		
Country/State of residence United Kingdom  Date of birth	cquircu	
Appointment type Are you being appointed as a designated member?  Yes  No  New member's service address Please complete the service address below You must also complete  Section 4a  Appointment type Your designation must status of the LLP	Country/State of residence This is in respect of your usual residential address as stated in	
Appointment type  Are you being appointed as a designated member?  Yes  No  New member's service address  Please complete the service address below You must also complete  Service address		
Please complete the service address below You must also complete  Service address	it match the	
reade complete the solute address below for mast also complete		
the member's usual residential address in Section 4a  Inis is the address that on the public record T	at will appear	
Building name/number   Time Central have to be your usual	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	
Street 32 Gallowgate Please state 'The LLP's Office' if your service :		
Post town Newcastle upon Tyne members as the LLP's		
County/Region office	cidontial	
Postcode N E 1 4 S N address here it will ap	If you provide your residential address here it will appear on the	
Country United Kingdom	public record	

## LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

5	Signatures	
	I consent to act as member of the above named LLP	_
New member's signature	X Villal	<
Authorising signature	Signature X	- <b>K</b>
	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
		_

## LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

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 Ben Martin	<b>™</b> Where to send	
Company name Osborne Clarke	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 2 Temple Back East	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ	
Post town Bristol	DX 33050 Cardiff	
County/Region Somerset  Postcode B S 1 E G  Country United Kingdom  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 0117 917 3160		
✓ Checklist	For LLPs registered in Northern Ireland The Registrar of Companies, Companies House,	
We may return forms completed incorrectly or with information missing	Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG 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>f</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	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk	
business purposes over the last 20 years  You have enclosed a relevant Section 243	This form is available in an	
application if applying for this at the same time as	alternative format. Please visit the	
completing this form  The new member has signed the form	forms page on the website at	
☐ An authorising signature has been given by a designated member	www.companieshouse.gov.uk	

designated member