

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

# 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

10 DEC 2014

**What this form is for**  
You may use this form to  
incorporate a Limited Liability  
Partnership

**X What this form is NOT for**  
You cannot use this form to  
incorporate a company. To do this,  
please use form IN01 'Application to  
register a company'

WEDNESDAY



\*L3MG16JE\*

LD1

10/12/2014

#76

COMPANIES HOUSE

### Part 1

### LLP details

A1

#### LLP details

To check if an LLP name is available use our WebCheck service and select the  
'Company Name Availability Search' option

[www.companieshouse.gov.uk/info](http://www.companieshouse.gov.uk/info)

Please show the proposed LLP name below

LLP name in full ①

NOTTING HILL ESTATE (GP)

Name ending ②

LLPXXXXXXXXXXXXXX

For official use

000397036

#### → Filling in this form

Please complete in typescript or in  
bold black capitals

All fields are mandatory unless  
specified or indicated by \*

#### ① Duplicate names

Duplicate names are not permitted  
A list of registered names can be  
found on our website. There are  
various rules that may affect your  
choice of name. More information is  
available at  
[www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)

#### ② 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 ①

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

#### ③ 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 ①

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

#### ③ 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

CHFP025

05/12 Version 5.0 Laserform International 5/12

# LL IN01

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

**A4**

### Registered office address ①

|                      |   |   |   |  |   |     |
|----------------------|---|---|---|--|---|-----|
|                      | Please give the registered office address of your LLP |   |   |  |   |     |
| Building name/number | One   |   |   |  |   |     |
| Street               | Curzon Street   |   |   |  |   |     |
| Post town            | LONDON  |   |   |  |   |     |
| County/Region        |   |   |   |  |   |     |
| Postcode             | W   | 1 | J |  | 5 | H D |

**① Registered office address**

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

**A5**

### Members' designation

Will all members from time to time be designated members? ②

☒ Yes

☐ No

**② Members' designation**

If 'Yes' all members named will be designated. If 'No' at least two members named must be designated

# LL IN01

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

## 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)             |   |
| Surname                      |   |
| Former name(s) ②             |   |
| Country/State of residence ③ |   |
| Date of birth                | d   d   m   m   y   y   y   y   |
| Designated member ④          | Please tick this box if you are consenting to act as a <b>designated member</b><br><input 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 |  |
| 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<br>X | X |
|-----------|----------------|---|

- 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

**B1**

#### Member appointments ①

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

|                              |   |
|------------------------------|---|
| Title *                      |   |
| Full forename(s)             |   |
| Surname                      |   |
| Former name(s) ②             |   |
| Country/State of residence ③ |   |
| Date of birth                | d d m m y y y y   |
| Designated member ④          | Please tick this box if you are consenting to act as a <b>designated</b> member<br><input 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 |  |
| 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<br>X | X |
|-----------|----------------|---|

- 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)

**Corporate member****C1****Corporate member appointments ①**

|                                |   |
|--------------------------------|---|
|                                | Please use this section to list all the corporate members of the LLP  |
| Name of corporate body or firm | LaSalle North American Holdings, Inc  |
| Building name/number           | 2711  |
| Street                         | Centerville Rd  |
|                                | Suite 400   |
| Post town                      | Wilmington  |
| County/Region                  | New Castle / Delaware   |
| Postcode                       | 1 9 8 0 8   |
| Country                        |   |
| Designated member ②            | Please tick this box if you are consenting to act as a designated member<br><input checked="" type="checkbox"/> |

① **Registered or principal address**  
This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number

② **Designated member**  
There must be at least two designated members at all times

**Additional appointments**  
If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page.

**C2****Location of the registry of the corporate body or firm**

Is the corporate member registered within the European Economic Area (EEA)?  
→ Yes Complete Section C3 only  
→ No Complete Section C4 only

**C3****EEA companies ③**

|  |  |
|--|--|
|  | Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register |
| Where the company/firm is registered ④ |  |
| Registration number                    |  |

③ **EEA**  
A full list of countries of the EEA can be found in our guidance [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)


④ This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC).

**C4****Non-EEA companies**

|   |  |
|---|--|
|   | Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register |
| Legal form of the corporate body or firm              | Corporation  |
| Governing law   | State of Delaware, USA   |
| If applicable, where the company/firm is registered ⑤ | State of Delaware, USA   |
| If applicable, the registration number                | 4488034  |

⑤ **Non-EEA**  
Where you have provided details of the register (including state) where the company or firm is registered you must also provide its number in that register

**C5****Signature ⑥**

|           |  |
|-----------|--|
|           | I consent to act as member of the proposed LLP named in Section A1.                              |
| Signature | Signature<br> |

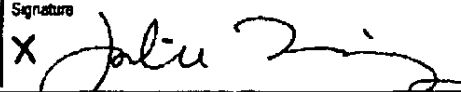
⑥ **Signature**  
The person named above consents to act as corporate member of the proposed LLP

CHFP025  
05/12 Version 5.0

**LL IN01**

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

**Corporate member**

|   |   |
|---|---|
| <b>C1 Corporate member appointments ①</b>   |   |
| Please use this section to list all the corporate members of the LLP.   |   |
| Name of corporate body or firm  | Jones Lang LaSalle Co-Investment Inc  |
| Building name/number  | 200   |
| Street  | East Randolph Drive   |
| Post town   | Chicago   |
| County/Region   | Illinois  |
| Postcode  | 6 0 6 0 1   |
| Country   | USA   |
| Designated member ②   | Please tick this box if you are consenting to act as a designated member<br><input checked="" type="checkbox"/> |
| <b>C2 Location of the registry of the corporate body or firm</b>  |   |
| Is the corporate member registered within the European Economic Area (EEA)?<br>→ Yes Complete Section C3 only<br>→ No Complete Section C4 only  |   |
| <b>C3 EEA companies ①</b>   |   |
| Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register  |   |
| Where the company/firm is registered ③  |   |
| Registration number   |   |
| <b>C4 Non-EEA companies</b>   |   |
| Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register  |   |
| Legal form of the corporate body or firm  | Corporation   |
| Governing law   | State of Maryland, USA  |
| If applicable, where the company/firm is registered ④   | State of Maryland, USA  |
| If applicable, the registration number  | D04666715   |
| <b>C5 Signature ⑤</b>   |   |
| I consent to act as member of the proposed LLP named in Section A1.   |   |
| Signature   |  X                           |
| <b>① Registered or principal address</b><br>This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number |   |
| <b>② Designated member</b><br>There must be at least two designated members at all times.<br><br><b>Additional appointments</b><br>If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page  |   |
| <b>③ EEA</b><br>A full list of countries of the EEA can be found in our guidance: <a href="http://www.companieshouse.gov.uk">www.companieshouse.gov.uk</a>  |   |
| <b>④ This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC)</b>  |   |
| <b>⑤ Non-EEA</b><br>Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register  |   |
| <b>⑥ Signature</b><br>The person named above consents to act as corporate member of the proposed LLP  |   |

CHFP025  
05/12 Version 5.0

**LL IN01**

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

**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  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 **Joseph Bentley**

Company name **King & Wood Malletsons LLP**

Address **10 Queen Street Place**

Post town **London**

County/Region **Greater London**

Postcode **E C 4 R 1 B E**

Country **United Kingdom**

DX **255 Chancery Lane**

Telephone



### Certificate

We will send your certificate to the presenter's 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 is payable on this form. Make cheques or postal orders payable to 'Companies House'. For information on fees, go to [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)



### 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,  
Second Floor, The Linenhall, 32-38 Linenhall Street,  
Belfast, Northern Ireland, BT2 8BG  
DX 481 NR 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 Number **OC397036**

The Registrar of Companies for England and Wales hereby certifies that

**NOTTING HILL ESTATE (GP) 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 and Wales.

Given at Companies House on **10th December 2014**.



**Companies House**



**THE OFFICIAL SEAL OF THE  
REGISTRAR OF COMPANIES**