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 You cannot use the form appoint a corporate mendo this, please use form 'Appointment of a corpor member of a Limited Lial Partnership (LLP)'



A23 12/06/2015

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1	LLP c	letai	ls									
LLP number	0	С	3 9	8	3	4		5				→ Filling in this form Please complete in typescript or in
LLP name in full	cs c	Capita	al Pai	tners	V (F	P) LI	LP					bold black capitals.
												All fields are mandatory unless specified or indicated by *
2	Date	of n	neml	oer's	арр	oint	me	ent				
Date of appointment	d	3	[2 ا	_	y 2	2	10°	5			
3	New	mer	nber	's de	tails							
Title *						***********						• Former name(s) Please provide any previous names
Full forename(s)	Irene	<u>; </u>		-								which have been used for business purposes in the past 20 years.
Surname	Zia											Married women do not need to give former names unless previously used for business purposes.
Former name(s) •								,				Continue in Section 6 if required.
Country/State of residence ©	Engla										-	Country/State of residence This is in respect of your usual
Date of birth	0 0	6		ל" ס		^y 1		^y 9 ^y 7	^y 2			residential address as stated in Section 4a.
Appointment type 🛭	Are y	ou be	ing ap	pointe	d as a	a desi	gna	ated mem	nber?			€ Appointment type
	_	Yes										Your designation must match the status of the LLP.
	[V]	No										
4	New	men	nber	's sei	vice	add	lre	SS Ø				
-								oelow. Yo ss in Sec		so complete		Service address This is the address that will appear on the public record. This does not
Building name/number	One											have to be your usual residential address.
Street	Conn	naugh	nt Pla	се,			 address. Please state 'The LLP's Registered 					
												Office' if your service address is recorded in the LLP's register of
Post town	Lond	on										members as the LLP's registered office.
County/Region	Lond	on_										If you provide your residential
Postcode	w	2	2	2 E	Т							address here it will appear on the public record.
Country	Engla	and	_									public record.

LL APO1
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5	Signatures	
	I consent to act as member of the above named LLP.	
vew member's ignature	x June Zh	
Authorising signature	Signature X	
	This form Aay be signed and authorised by: Designated member, Judicial factor.	
6	Additional former names (continued from Section 3)	
ormer names 0		● Additional former names Use this space to enter any additional names.

LL AP01

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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 TOM HUTCH INSOM Company name Herbert Smith Freehills LLP

Post town London

County/Region London

Postcode E C 2 A 2 E G

Country England

✓ Checklist

020 7374 8000

We may return forms completed incorrectly or with information missing.

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.
- ☐ You have provided both the service address and the 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 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.
- An authorising signature has been given by a designated member.

Important information

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

■ 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 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.

i Further information

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 www.companieshouse.gov.uk