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)

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Companies House

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

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



A11

23/02/2016 COMPANIES HOUSE

#50

Part 1 LLP details

Partnership

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		
	Please show the proposed LLP name below		
LLP name in full ⁰	eKreative		
Name ending @	LLP/ Limited Liability Partnership		
For official use	OC 404 487		

Filling in this form
Please complete in typescript or in
bold black capitals

All fields are mandatory unless specified or indicated by *

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.gov.uk/companieshouse.

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

A2

LLP name restrictions o

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

OLLP name restrictions

A list of sensitive or restricted words or expressions that require consent can be found in guidance available on our website www.gov.uk/companieshouse

А3

Situation of registered office o

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

Northern Ireland

Scotland

O 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 INO1
Application for the incorporation of a Limited Liability Partnership (LLP)

Α4	Registered office address o	
	Please give the registered office address of your LLP	• Registered office address You must ensure that the address
Building name/number	2A St George's Wharf	shown in this section is consistent with the situation indicated in
Street		section A3
		You must provide an address in England or Wales for LLPs to be
Post town	London	registered in England and Wales
County/Region	London	You must provide an address in Wales, Scotland or Northern Ireland
Postcode	S W 8 2 L E	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? Yes No	❷ Members' designation If 'Yes' all members named will be designated If 'No' at least two members named must be designated

LL INO1
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 I all members will be designated.	east two designated members	
Member	•		
B1	Member appointments •		
	Please use this section to list all the member appointments taken on formation For a corporate member complete C1-C4	Appointments For corporate member appointments, please complete section C1 C4	
Title*		instead of section B	
Full forename(s)		• Former name(s) Please provide any previous names	
Surname Former name(s)		(including maiden or married names) which have been used for business purposes in the last 20 years	
Country/State of		Country/State of residence This is in respect of your usual residential address as stated in	
residence 🛭		Section B4	
Month/year of birth 💁	X X m m y y y	O Month and year of birth Please provide month and year only	
Designated member 9	Please tick this box if the person is consenting to act as a designated member	• 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 [©]		
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	O Service address This is the address that will appear on the public record This does not	
Building name/number		have to be your usual residential address	
Street		Please state 'The LLP's Registered Office' if your service address will	
Post town		be recorded in the LLP's register of members' particulars as the LLP's	
County/Region		registered office	
Postcode		If you provide your residential address here it will appear on the	
Country		public record	

LL IN01

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

Member

B1	Member appointments ●	
	Please use this section to list all the member appointments taken on formation For a corporate member complete C1-C4	• Appointments For corporate member appointments, please complete section C1 C4
Title*		instead of section B Former name(s)
Full forename(s)		Please provide any previous names
Surname Former name(s) 9		(including maiden or married names) which have been used for business purposes in the last 20 years
Country/State of		O Country/State of residence This is in respect of your usual residential address as stated in
residence ©		Section B4
	X X m m y y y	O Month and year of birth Please provide month and year only
Designated member 9	Please tick this box if the person is consenting to act as a designated member	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 [©]	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	O Service address This is the address that will appear on the public record This does not
Building name/number		have to be your usual residential
Street		address Please state 'The LLP's Registered Office' if your service address will
Post town		be recorded in the LLP's register of members' particulars as the LLP's registered office
County/Region		If you provide your residential
Postcode		address here it will appear on the public record
Country		

LL IN01

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

Corporate member

C1	Corporate member appointments®		
	Please use this section to list all the corporate members of the LLP	• Registered or principal address	
Name of corporate body or firm	Slipstream Management 2+d.	This is the address that will appear on the public record This address must be a physical location for the	
Building name/number	2nd floor, John Compton Bailding	delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or	
Street	William Peter Boulevard, Castries	LP (Legal post in Scotland) number Designated member	
Post town	Castries	There must be at least two designated members at all times	
County/Region	Castries	Additional appointments If you wish to appoint more than one	
Postcode	P0B0X838	corporate member, please use the 'Corporate member appointments' continuation page	
Country	6t. Lucia	Continuation page	
Designated member 9	Please tick this box if the person is consenting to act as a designated member		
C2	Location of the registry of the corporate body or firm	<u> </u>	
•	Is the corporate member registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only		
G.			
G	Please give details of the register where the company file is kept (including the	● EEA A full list of countries of the EEA can	
Where the company/	relevant state) and the registration number in that register	be found in our guidance www.companieshouse.gov.uk	
firm is registered • Registration number		This is the register mentioned in Article 3 of the First Company Law	
	N. FPA	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.	Non-EEA Where you have provided details of the register (including state) where the company or firm is registered,	
Legal form of the corporate body or firm	Limited Liability Company	you must also provide its number in that register	
Governing law	International Business Companies Act Cap 12.14		
If applicable, where the company/firm is registered •	International Business Companies Perietes, 5+. Lucia		
If applicable, the registration number	2015-00368		
		l	

LL INO1
Application for the incorporation of a Limited Liability Partnership (LLP)

Corporate member

Name of corporate body or firm Building name/number Street W. I liam Peter Bou Luard Post town Castries County/Region Country Country Country Designated member Please tick this box if the person is consenting to act as a designated member Country Coun	d or principal address address that will appear lic record. This address obysical location for the documents. It cannot be umber (unless contained il address), DX number or lost in Scotland) number d member be at least two members at all times.
Name of corporate body or firm Building name/number Street W. I liam Peter Bou Luard Post town Castries County/Region Country Designated member Please tick this box if the person is consenting to act as a designated member 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 Please give details of the registration number in that register 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 where the terms of the register in which it is entered (including the state) and its registration number in that register where the register in which it is entered (including the state) and its registration number in that register 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	address that will appear lic record. This address obysical location for the documents. It cannot be umber (unless contained il address), DX number or ost in Scotland) number d member be at least two
Building name/number Street William Peter Boulewrd Post town Castries County/Region County/Region Country Designated member Please tick this box if the person is consenting to act as a designated member Country 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 Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register 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 Post town Additional five within a function of the corporate body or firm Additional five within a function of the post of the second	umber (unless contained Il address), DX number or ost in Scotland) number d member be at least two
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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. Where you the register the comparison.	the First Company Law
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. Where you the register the comparison.	
	have provided details of (including state) where ny or firm is registered,
Legal form of the corporate body or firm Limited Liability Company that register	
Governing law International Business Companies Act Cap 12.14	lso provide its number in r
If applicable, where the company/firm is registered. St. Lucia Toternational Business Companies Register St. Lucia	•
If applicable, the registration number 2015 - 0000 8	•

LL IN01
Application for the incorporation of a Limited Liability Partnership (LLP)

Part 3	Consent to act and signature	
D1	Consent to act	<u> </u>
	Please tick the box to confirm consent I confirm that each of the persons named as a member or designated member has consented to act in that capacity	
D2	Signature	
	I certify that I am a	
	- Solicitor engaged in the formation of this LLP or - 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	

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.

Company name Fortgate Markon LLP

Post town London

County/Region London

Postcode SW82LE

Country Unifed Kingdom

DX

Telephone +44 (0) 2078400200

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 LLP is the same as one already on the register as permitted by The Company LLP and Business (Names and Trading Disclosures)

 Begulations 2015, 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
- You have completed the consent to act
- You have signed the form
- 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 and day of birth

£ 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.gov.uk/companieshouse

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

Further information

For further information, please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse



FILE COPY

CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership Number OC404487

The Registrar of Companies for England and Wales hereby certifies that

EKREATIVE 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 23rd February 2016.



