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

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A22 06/12/2016 #209
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TUESDAY

✓ **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 to appoint a corporate mer... do this, please use form ... 'Appointment of a corpo... member of a Limited Lia... Partnership (LLP)'.

1 LLP details

LLP number	OC411938
LLP name in full	MEDICAL EXPERT WITNESS ALLIANCE LIMITED LIABILITY PARTNERSHIP

→ **Filling in this form**
Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by *

2 Date of member's appointment

Date of appointment	d d m m y y y y: 05 12 2016

3 New member's details

Title *	DR
Full forename(s)	ROSHNI
Surname	AHMED
Former name(s) ❶	
Country/State of residence ❷	UK
Month/year of birth ❸	X X m m y y y y: 02 1978
Appointment type ❹	Are you being appointed as a designated member? ☑ Yes ☐ No

❶ **Former name(s)**
Please provide any previous names (including maiden or married names) which have been used for business purposes in the last 20 years.

Continue in section 7 if required.

❷ **Country/State of residence**
This is in respect of your usual residential address as stated in section 4a.

❸ **Month and year of birth**
Please provide month and year only.

❹ **Appointment type**
Your designation must match the status of the LLP.

4 New member's service address ❺

Please complete the service address below. You must also complete the member's usual residential address in **Section 4a.**

Building name/number	6TH FLOOR, BLACKFRIARS HOUSE,
Street	PARSONAGE
Post town	MANCHESTER
County/Region	GREATER MANCHESTER
Postcode	M3 2JA
Country	U.K.

❺ **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 is recorded in the LLP's register of members as the LLP's registered office.

If you provide your residential address here it will appear on the public record.

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5 Consent to act as member

Please tick the box to confirm consent.

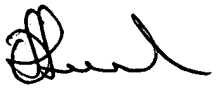
☑ The LLP confirms that the person named in section 3 has consented to act as a member of the LLP named in section 1.

6 Signature

I am signing this form on behalf of the LLP.

Signature

Signature

X  X

This form must be signed and authorised by:
Designated member, Judicial factor.

7 Additional former names (continued from Section 3)

Former names ❶

❶ **Additional former names**
Use this space to enter any additional names.

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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

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone

Checklist

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 completed the date of appointment.
- ☐ You have included all former names used for business purposes over the last 20 years.
- ☐ You have provided the month and year of birth in section 3.
- ☐ You have indicated if you are a designated member.
- ☐ You have provided your full date of birth in section 3a.
- ☐ 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 enclosed a relevant section 243 application if applying for this at the same time as completing this form.
- ☐ You have ticked the consent to act statement in section 5.
- ☐ You have signed the form.

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.

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