of an LLP.

PONITALE

LL AP02

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





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✓ What this form is for

You may use this form to appoint a corporate body or firm as member

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28/04/2021 COMPANIES HOUSE

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1	LLP details								
LLP number	O C 4 2 9 5 9 5	→ Filling in this form Please complete in typescript or in							
LLP name in full	NORTH WALES ORTHOPAEDICS AND HEALTH LLP	bold black capitals. All fields are mandatory unless specified or indicated by *							
2	Date of corporate member's appointment								
Date of appointment	$\begin{bmatrix} d_0 \\ 0 \end{bmatrix} \begin{bmatrix} d_5 \\ \end{bmatrix} \begin{bmatrix} m_4 \\ \end{bmatrix} \begin{bmatrix} \gamma_2 \\ \end{bmatrix} \begin{bmatrix} \gamma_0 \\ \end{bmatrix} \begin{bmatrix} \gamma_2 \\ \end{bmatrix} \begin{bmatrix} \gamma_1 \\ \end{bmatrix}$, mare the							
3	Corporate member's details								
Corporate body/firm	I MALEK LIMITED	Registered or principal address							
name	This is the address that will ap on the public record.								
Building name/number	50	This address must be a physical location for the delivery of							
Street	SHERBOURNE AVENUE	documents. It cannot be a PO box number (unless contained within a							
		full address), or DX number.							
Post Town	CHESTER								
County/Region		_							
Postcode	C H 4 7 Q U								
Country	ENGLAND								
4	Corporate member's appointment type	-							
Appointment type •	Are you being appointed as a designated member? ✓ Yes □ No	O Appointment type Your designation must match the status of the LLP.							
	Is the corporate member a limited company registered in the UK? → Yes Complete Section 5 → No Complete Section 6								

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5	UK-registered limited companies •				
,	Please give the company registration number.	You can find the registration number on our website: Hyper What a companies hours group with			
Registration number	0 9 4 0 4 0 0 8	https://beta.companieshouse.gov.uk			
	1 ₂ 1 ₃				
6	Other corporate bodies & firms				
	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 have provided details of the register (including state) where the company or firm is registered, you must also provide its number in			
Legal form of the corporate body or firm		that register			
Governing law					
If applicable, where the company/firm is registered 9		·			
If applicable, the registration number		·			
7	Consent to act as corporate member				
	Please tick the box to confirm consent. The LLP confirms that the corporate body named in section 3 has consented to act as a corporate member of the LLP named in section 1.				
8	Signature				
	I am signing this on behalf of the LLP.				
Signature	X X	•			
	This form must be signed / horised by: Designated member, J yr.				

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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	SALLY BARR								
Company name	TRUST HEALTH LTD								
Address	PARK HOUSE								
NORTH STREET									
Post town	HORSHAM								
County/Region	WEST SUSSEX								
Postcode		R	Н	1	2		1	R	N
Country									
DX					-				
Telephone	014	03 24	1148	4					

✓ 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 record.
- ☐ You have completed the date of appointment.
 ☐ You have entered the new corporate member's
- The address must be a physical location. It cannot be a PO Box number (unless part of a full address), or DX.
- You have completed either section 5 or section 6.
 You have ticked the consent to act statement on section 7.
- 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.

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.

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.

i 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