

FILE COPY



**CERTIFICATE OF INCORPORATION
OF A
LIMITED LIABILITY PARTNERSHIP**

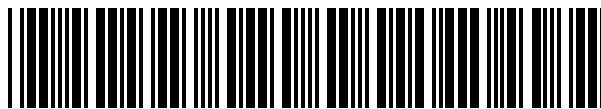
Partnership No. **OC450423**

The Registrar of Companies for England and Wales, hereby certifies that

BURKE CAPITAL LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership, that the partnership is limited, and the situation of its registered office is in England and Wales

Given at Companies House, Cardiff, on **27th December 2023**



NOC4504235



Companies House



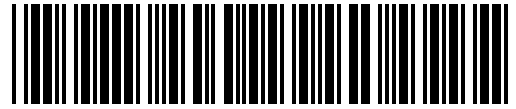
**THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES**



Companies House

LLIN01(ef)

Application to register an LLP



Received for filing in Electronic Format on the: **21/12/2023**

XCIVBNUX

LLP name in full: **BURKE CAPITAL LLP**

Company Type: **Limited Liability Partnership**

*Situation of
Registered Office:* **England and Wales**

*Proposed Registered
Office Address:* **2ND FLOOR 1 BEDFORD STREET
AMPTHILL
BEDS
ENGLAND MK45 2LU**

At least two members named must be designated

LLP Members

Type: **Person**

Full Forename(s): **LEAH MAIR**

Surname: **BURKE**

Former Names:

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/09/1989**

Service Address: **recorded as Company's registered office**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Type: **Person**

Full Forename(s): **MATTHEW ADAM**

Surname: **BURKE**

Former Names:

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/03/1988**

Service Address: **recorded as Company's registered office**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Persons with Significant Control (PSC)

Statement of initial significant control

On incorporation, there will be someone who will count as a Person with Significant Control (either a registerable person or relevant legal entity (RLE)) in relation to the LLP

Individual Person with Significant Control details

Names: **LEAH MAIR BURKE**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/09/1989** *Nationality:* **BRITISH**

Service address recorded the Limited Liability Partnership's registered office

The subscribers confirm that each person named as an individual PSC in this application knows that their particulars are being supplied as part of this application.

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the LLP voting rights in the LLP.

Individual Person with Significant Control details

Names: **MATTHEW ADAM BURKE**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/03/1988** *Nationality:* **BRITISH**

Service address recorded the Limited Liability Partnership's registered office

The subscribers confirm that each person named as an individual PSC in this application knows that their particulars are being supplied as part of this application.

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the LLP voting rights in the LLP.

Statement of Compliance

I confirm the requirements of the Companies Act 2006 as to registration have been complied with.

Authorisation

Authoriser Designation: **member**

Authenticated **YES**
