In accordance with Section 9 of the Limited Liability Partnerships Act 2000.

## LL CH01

## Change of details of a member of a Limited Liability Partnership (LLP)



What this form is for You may use this form to change the details of an individual person who is a member. What this form is NOT for
You cannot use this form to chang
the details of a corporate membe
To do this, use form LL CH02
'Change of details of a corporate
member of a Limited Liability
Partnership'.



SCT 19/06/2010
COMPANIES HOUSE

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|                    | Partnership'.   | COMPANIES HOUSE  |  |
|--------------------|---|--|--|
| 1                  | LLP details   | <del></del>  |  |
| LP number          | S O 3 0 2 2 9 6   | Filling in this form     Please complete in typescript or in bold black capitals.  All fields are mandatory unless specified or indicated by *   |  |
| LLP name in full   | APIS CLINICAL SERVICES LLP  |  |  |
|                    |   |  |  |
| 2                  | Member's current details on the Register •  |  |  |
| Date of birth *    | d 2 d 1 m 0 m 8 y 1 y 9 y 5 y 7   | O Current details This information is used to identify your details on the U.P record. Providing a date of birth will help us identify the correct person on the public record. This is voluntary information and if completed it will be placed on the public record. |  |
| Title *            | DR  |  |  |
| Full forename(s)   | ADARSH BEHARI   |  |  |
| Surname            | LAL .   |  |  |
| 3                  | Date of change of details   |  |  |
| Date of change     | d 0 d 1 m 1 m 0 y 2 y 0 y 0 y 9   |  |  |
| of details         | Please complete the appropriate sections to indicate which of your details have changed.  |  |  |
| 4                  | Change of name details  |  |  |
| litle *            |   | New name Please enter your new name.   |  |
| Full forename(s) • | ·   | - Trease cites you new name.   |  |
| Surname Ø          |   |  |  |
| 5                  | Change of service address <sup>©</sup>  |  |  |
| Building name/numb | er GOLDEN JUBILEE NATIONAL HOSPITAL   | Service address  This is the address that will appea   |  |
| Street             | BEARDMORE STREET  | on the public record. This does not have to be your usual residential address.   |  |
| Post town          | CLYDEBANK   | Please state 'The LLP's Registered Office' if your service address is  |  |
| County/Region      | WEST DUNBARTONSHIRE   | recorded in the company's register   |  |
| Postcode           | G 8 1 - 4 H X   | of members as the LLP's registered office.   |  |
| Country            | UNITED KINGDOM  I confirm that there has been no change in the LLP's register of members' | If you provide your residential address here it will appear on the public record.  Please complete Section 5a if your usual residential address has changed.   |  |
|                    | residential addresses.  |  |  |

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| 6  | Change of country/state of residence                                    |   |  |  |  |
|--|---|---|--|--|--|
| Change of country/<br>state of residence |   |   |  |  |  |
| 7  | Change of status of member  |   |  |  |  |
| _  | I consent to act as a  designated member member of the above named LLP. |   | <ul> <li>Change of status         Please tick one box.     </li> <li>Consent signature         Please sign to indicate your consent to the change of status.     </li> <li>Please only sign here if you are</li> </ul> |  |  |
| Member's consent signature <b>9</b>      | Signature   | X | changing your status as a member.  |  |  |
| 8  | Authorising signature ®   |   |  |  |  |
|  | This must be completed in all cases.                                    |   | Authorising signature<br>This must be signed in all cases.   |  |  |
|  | I am signing this form on behalf of the LLP.                            |   |  |  |  |
| Signature                                | This form may be signed by: Designated member, Judicial factor.         | × |  |  |  |

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| You do not have to  | ····  |  |  |  |
|---|---|--|--|--|
| you do it will help (<br>on the form. The co  | give any contact information, but if Companies House if there is a query ntact information you give will be of the public record.   | Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.  |  |  |
| Contact name ROSSL  | YN TURNER   | Where to send  |  |  |
| Address 4 ROYAL CRESCENT  Post town GLASGOW  County/Region LANARKSHIRE  Postcode G 3 - 7 S L  Country UNITED KINGDOM  DX  Telephone 0141 332 6331  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 in Section 3 the date of change |   | 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, First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS. 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. |  |  |
| ticked the no checked the noch change in your your new usual.  Any new address cannot be a PO service address) number.  You have entered your membersh  | nged the service address, you have ange box in Section 5 to indicate no usual residential address or provided residential address in Section 5a. Is must be a physical location. They Box number (unless part of a full , DX or LP (Legal Post in Scotland) and the relevant change of details. If your consent if you have changed in status in Section 7. | 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   |  |  |