



**Appointment of Member of a  
Limited Liability Partnership (LLP)**

LLP name in full: **DANESTONE MEDICAL PRACTICE LLP**

LLP Number: **SO307407**



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## **New Appointment Details**

Date of Appointment: **01/04/2022**

Name: **DR LINZI JAYNE LUMSDEN**

The Limited Liability Partnership (LLP) confirms that the person named has consented to act as a designated member.

Appointment is for a Member

Service Address: **DANESTONE MEDICAL PRACTICE FAIRVIEW STREET  
DANESTONE  
ABERDEEN  
UNITED KINGDOM  
AB22 8ZP**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **\*\*/09/1985**

## **Authorisation**

**Authenticated**

**This form was authorised by one of the following:**

**Designated member, Judicial Factor.**