



Please complete in typescript,
or in bold black capitals.

CHWP000

Please leave this box blank

Full Name of Limited
Liability Partnership

Situation of Registered
Office

Registered Office
Address

Post town

PO Box number
only is not
acceptable

County / Region

Will all Members from time to
time be designated members?

(List members overleaf)

Number of continuation sheets
attached to this application for
incorporation

I certify that I am a: (Please tick appropriate box)

☐

Solicitor engaged in the formation of this LLP

☒

Member named overleaf of the LLP

And that the two or more persons named overleaf are associated for
carrying on a lawful business with a view to profit.

Signed

Jeremy Stevenson

Date

March 28, 2004

You do not have to give any contact
information in the box opposite but if you
do, it will help Companies House to
contact you if there is a query on the
form. The contact information that you
give will be visible to searchers of the
public record.

JEREMY STEVENSON

CLIFFORD CHANCE

Tel 020 7006 1000

E-mail jeremy.stevenson@cliffordchance.com

When you have completed and signed the form please send it to the
Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
for partnerships registered in England and Wales or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for partnerships registered in Scotland DX 235 Edinburgh
or LP - 4 Edinburgh 2



LD5
COMPANIES HOUSE

0054
31/03/04

Form April 2002

List of Members on Incorporation

Peers or others known by a title may use the title instead of or in addition to their name

Surname or Corporate name

BLOOD

Forename(s)

DAVID WAYLAND

Member Reference Number *
(as advised by Companies House)

Date of Birth

Day Month Year

1 5 0 4 1 9 5 9

†† Usual Residential Address (or registered or principal office address in the case of a corporation or

9 EARLS TERRACE

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

☐

Post town

LONDON

County / Region

UK
Postcode

W8 6LP

Country

UK

I consent to act as a member of the limited liability partnership named on page 1

(Please tick this box if consenting to act as a designated member)

X

* Voluntary information

Signed

David Wayland

Date

March 28, 2009

(Member to sign and date)

Peers or others known by a title may use the title instead of or in addition to their name

Surname or Corporate name

BLOOD

Forename(s)

ALISON L

Member Reference Number *
(as advised by Companies House)

Date of Birth

Day Month Year

1 5 1 0 1 9 5 9

†† Usual Residential Address (or registered or principal office address in the case of a corporation or Scottish firm

9 EARLS TERRACE

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985

☐

Post town

LONDON

County / Region

UK
Postcode

W8 6LP

Country

UK

I consent to act as a member of the limited liability partnership named on page 1

(Please tick this box if consenting to act as a designated member)

X

* Voluntary information

Signed

Alison L Blood

Date

March 28, 2009

(Member to sign and date)

NOTE: Unless there are at least two designated members, all members will be designated members.

FILE COPY



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

Partnership No. OC307600

The Registrar of Companies for England and Wales hereby certifies that

A & D RESEARCH AND CAPITAL MANAGEMENT LLP

is this day incorporated under the Limited Liability Partnerships Act 2000
as a limited liability partnership and that the partnership is limited.

Given at Companies House, Cardiff the 05 April 2004



THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES



Companies House

— for the record —