Please complete in typescript,
or in bold black capitals.

CHWP000

LLP288a

(LLP Act 2000 Section 9)

Appointment of a Member to a Limited Liability Partnership

*(NOT for terminating membership (use Form LLP288b)
or change of particulars (use Form LLP288c))*

LLP Number	OC346320
Full Name of Limited Liability Partnership	Haymarket Financial LLP

Date of appointment

Day	Month	Year
2 7	0 7	2 0 0 9

* Voluntary Information

Member Reference Number *
(As advised by Companies House)

Date of birth

Day	Month	Year
1 2	0 1	1 9 6 9

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

Surname or Corporate name JEFF SOCKWELL

Forename(s) SOCKWELL JEFF

Usual residential address †† 12 LAMBOLLE ROAD

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.

Post town	LONDON	**UK Postcode**	NW3 4HP
County / Region		**Country**	UK

Designated member *(Please tick appropriate box)*

[ ] YES [✓] NO

I consent to act as a member of the above named limited liability partnership

Consent signature | **Date** 2 | 9 | 09

Another Member being a Designated Member must sign and date the form in the boxes below.

Signed | **Date** 2 | 9 | 09

Designated Member

You do not have to give any contact information in the box opposite but if you do. it will help Companies House

Haymarket Financial LLP, 1 Pall Mall East, London SW1Y 5AU

Tel

DX number	DX exchange

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, 139 Fountainbridge, Edinburgh, EH3 9FF
for partnerships registered in Scotland

DX 235 Edinburgh
or LP - 4 Edinburgh 2