

LLAP01

Appointment of member of a Limited Liability Partnership (LLP)

This form is part of the PROOF scheme. If your LLP is registered, paper versions of this form will be rejected and sent back to your office address. Avoid unnecessary rejection and file online. You can view your LLP's PROOF status on the WebFiling Service.



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A26 21/10/2010 347

COMPANIES HOUSE

ATOJ408A

A09 14/10/2010 230

COMPANIES HOUSE

A18 06/10/2010 102

COMPANIES HOUSE

✓ What this form is for
You may use this form
to appoint an individual as a
member of an LLP

✗ What this form is NOT for
You cannot use the form to
appoint a corporate member.
If you wish to do this, please use form LLAP02.
'Appointment of a corporate
member of a Limited Liability
Partnership (LLP)'

THURSDAY
THURSDAY
WEDNESDAY

1 LLP details

LLP number O C 3 4 8 4 8 9

LLP name in full DREAM CONTROL LLP

→ **Filling in this form**
Please complete in typescript or in
bold black capitals
All fields are mandatory unless
specified or indicated by *

2 Date of member's appointment

Date of appointment d 2 2 m 1 0 y 2 0 y 0 9

3 New member's details

Title *	MS
Full forename(s)	SUSAN
Surname	WHEATLEY
Former name(s) ①	
Country/State of residence ②	UNITED KINGDOM
Date of birth	d 2 9 m 0 4 y 1 9 y 6 6
Appointment type ③	Are you being appointed as a designated member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

① Former name(s)
Please provide any previous names
which have been used for business
purposes in the past 20 years

Married women do not need to give
former names unless previously used
for business purposes.

Continue in Section 6 if required

② Country/State of residence
This is in respect of your usual
residential address as stated in
Section 4a

③ Appointment type
Your designation must match the
status of the LLP

4 New member's service address ④

Please complete the service address below. You must also complete the member's usual residential address in Section 4a	
Building name/number	2
Street	GRANTHAM ROAD
Post town	BRIGHTON
County/Region	EAST SUSSEX
Postcode	B N 1 6 E E
Country	UNITED KINGDOM

④ Service address
This is the address that will appear
on the public record. This does not
have to be your usual residential
address.

Please state 'The LLP's Registered
Office' if your service address is
recorded in the LLP's register of
members as the LLP's registered
office.

If you provide your residential
address here it will appear on the
public record.

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

CHICAGO, ILL.

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LL AP01**Appointment of member of a Limited Liability Partnership (LLP)****5****Signatures**

I consent to act as member of the above named LLP

New member's
signature

Signature

X



X

Authorising signature

Signature

X



X

This form may be signed and authorised by Designated member, Judicial factor

6**Additional former names** (continued from Section 3)

Former names ①

① Additional former namesUse this space to enter
any additional names

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

Presenter information

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

Contact name	NICOLA DEVERSON
Company name	CREASEY SON AND WICKENDEN
Address	HEARTS OF OAK HOUSE 4 PEMBROKE ROAD
Post town	SEVENOAKS
County/Region	KENT
Postcode	T N 1 3 1 X R
Country	UNITED KINGDOM
DX	
Telephone	01732 450744 (Agent)

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 provided a correct date of birth
- ☐ You have completed the date of appointment
- ☐ You have completed the appointment type
- ☐ You have indicated if you are a designated member
- ☐ You have provided both the service address and the usual residential address
- ☐ Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number
- ☐ You have included all former names used for business purposes over the last 20 years
- ☐ You have enclosed a relevant Section 243 application if applying for this at the same time as completing this form
- ☐ The new member has signed the form
- ☐ An authorising signature has been given by a designated member

Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.

Where to send

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,
Second Floor, The Linenhall, 32-38 Linenhall Street,
Belfast, Northern Ireland, BT2 8BG
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

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

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1. The first group of variables, *demographic*, includes age, sex, and marital status. The second group, *education*, includes years of schooling, high school graduation, and college graduation. The third group, *employment*, includes employment status, occupation, and industry. The fourth group, *income*, includes household income and personal income. The fifth group, *health*, includes self-rated health, physical disability, and mental disability. The sixth group, *social capital*, includes social network, social support, and social participation. The seventh group, *life satisfaction*, includes life satisfaction and happiness. The eighth group, *quality of life*, includes quality of life and well-being. The ninth group, *health status*, includes health status and health-related quality of life. The tenth group, *healthcare utilization*, includes healthcare utilization and healthcare satisfaction. The eleventh group, *healthcare access*, includes healthcare access and healthcare equity. The twelfth group, *healthcare costs*, includes healthcare costs and healthcare financing. The thirteenth group, *healthcare quality*, includes healthcare quality and healthcare safety. The fourteenth group, *healthcare innovation*, includes healthcare innovation and healthcare research. The fifteenth group, *healthcare policy*, includes healthcare policy and healthcare regulation. The sixteenth group, *healthcare system*, includes healthcare system and healthcare organization. The seventeenth group, *healthcare reform*, includes healthcare reform and healthcare change. The eighteenth group, *healthcare future*, includes healthcare future and healthcare vision. The nineteenth group, *healthcare challenge*, includes healthcare challenge and healthcare problem. The twentieth group, *healthcare opportunity*, includes healthcare opportunity and healthcare potential.

1. *Journal of Management Studies*, 1996, 33, 1, 1-14.

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$\frac{d}{dt} \left(\frac{1}{\rho} \right) = - \frac{1}{\rho^2} \frac{d\rho}{dt}$

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