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

## LL AP01

## Appointment of member of a Limited Liability Partnership (LLP)



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 membe do this, please use form LL. 'Appointment of a corporate member of a Limited Liabilit Partnership (LLP)'



A50 26/07/2011 COMPANIES HOUSE 47

	rarthership (LLP)	•••••	
1	LLP details		
LLP number	O C 3 5 9 1 0 3	→ Filling in this form Please complete in typescript or in bold black capitals	
LLP name in full	The Boston Consulting Group UK LLP		
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	$\begin{bmatrix} d & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} d & 1 & 0 \end{bmatrix}$ $\begin{bmatrix} d & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} d & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} d & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} d & 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix}$		
3	New member's details		
Title *		• Former name(s) Please provide any previous names	
Full forename(s)	Nicolas	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	
Surname	Aryana		
Former name(s) •	·	Continue in Section 6 if required	
Country/State of residence •	VIK	Country/State of residence This is in respect of your usual	
Date of birth	$\begin{bmatrix} d & 1 & d & 2 & 0 \end{bmatrix}$ $\begin{bmatrix} m & m & m & 2 & 0 \end{bmatrix}$ $\begin{bmatrix} y & 1 & y & 9 & 6 & 0 \end{bmatrix}$ $\begin{bmatrix} y & 6 & 0 & 1 & 9 & 1 \end{bmatrix}$	residential address as stated in Section 4a  Section 4a  Appointment type Your designation must match the status of the LLP	
Appointment type   ●	Are you being appointed as a designated member?  Yes  No		
4	New member's service address ©	· · · · · · · · · · · · · · · · · · ·	
	Please complete the service address below You must also complete the member's usual residential address in <b>Section 4a</b>	This is the 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	
Building name/number	20		
Street	Manchester Square		
Post town	London		
County/Region			
Postcode	W   1   U     3   P   Z		
Country	United Kingdom		

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X MAJa	
Authorising signature	Signature  X  B  This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names <b>①</b>		Additional former names     Use this space to enter     any additional names