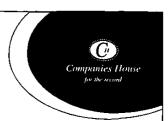
In accordance with Section 9 of the Limited Liability Partnerships Act 2000

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



A50 26/07/2011 COMPANIES HOL

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									rardiership (ccr)	COMPANIES HOUSE			
1	LLP	d	etails	•					_	_			
LLP number	0	Ţ,	C 3	5	9	1	0	[3	→ Filling in this form Please complete in typescript or in			
LLP name in full	The	e E	3ostor	Con	bold black capitals.								
										All fields are mandatory unless specified or indicated by *			
2	Dat	e	of m	embe	er's a	ppo	oıntı	me	ent				
Date of appointment	_q 0	d	1	<u></u> "0	^m 4	-	^y 2	2	70 71 71				
3	Nev	V	mem	ber's	det	ails		Ť					
Title *					-					• Former name(s)			
Full forename(s)	Timothy Monger									Please provide any previous names which have been used for business purposes in the past 20 years.			
Surname										Married women do not need to give former names unless previously used for business purposes			
Former name(s) •		1								Continue in Section 6 if required			
Country/State of residence •	UK									Country/State of residence This is in respect of your usual			
Date of birth	³ 1	ď	2	" 0	" 9		^y 1		⁷ 9 ⁷ 7 ⁷ 2	residential address as stated in Section 4a			
Appointment type	Are	-	ou bein	g app	ointe	Appointment type							
			'es		Your designation must match the status of the LLP								
			10										
4	Nev	New member's service address [©]											
			e comp ember		Service address This is the address that will appear on the public record This does not								
Building name/numbe	er 20									have to be your usual residential address.			
Street	Mar	nc	heste	r Squ	are					Please state 'The LLP's Registered			
			_			Office' if your service address is recorded in the LLP's register of							
Post town	London									members as the LLP's registered			
County/Region	W 1 U 3 P Z									If you provide your residential			
Postcode										address here it will appear on the			
Country	Unit	te	d Kıng	dom						pasic record			

LL APO1
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	
Authorising signature	Signature X This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names •		● Additional former names Use this space to enter any additional names.