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

X What this form is NOT for You cannot use the form to appoint a corporate member 1 do this, please use form LL AF 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



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1	LLP details		
LLP number	O C 3 5 9 1 0 3	→ Filling in this form Please complete in typescript or in	
LLP name in full	The Boston Consulting Group UK LLP	bold black capitals	
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	$\begin{bmatrix} d & 0 \end{bmatrix} \begin{bmatrix} d & 1 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 4 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 1 \end{bmatrix} \begin{bmatrix} y & 1 \end{bmatrix}$		
3	New member's details		
Title *		• Former name(s)	
Full forename(s)	Mark	Please provide any previous names which have been used for business	
		purposes in the past 20 years	
Surname	Holden	Married women do not need to give former names unless previously used for business purposes	
Former name(s) •			
Country/State of residence •	UK	Continue in Section 6 if required Country/State of residence This is in respect of your usual	
Date of birth	$\begin{bmatrix} \sigma_2 & \sigma_3 & \sigma_4 & \sigma_5 & \sigma_$	residential address as stated in Section 4a Pappointment 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 Section 4a	O Service address This is the address that will appear on the public record. This does not	
Building name/number	20	have to be your usual residential	
Street	Manchester Square	address	
		Please state 'The LLP's Registered Office' if your service address is	
Post town	London	recorded in the LLP's register of members as the LLP's registered	
County/Region		office	
Postcode	W 1 U 3 P Z	If you provide your residential address here it will appear on the	
Country	United Kingdom	public record	

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X Be Hell 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.