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

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)



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

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 Af 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



A03 10/11/2011
COMPANIES HOUSE

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	Partnership (LLP)'	COMPANIES HOUSE	
1	LLP details		
LLP number	000366886	Filling in this form Please complete in typescript or in	
LLP name in full	GOAL SOLUTIONS LLP	bold black capitals	
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment			
3	New member's details		
Title *	UISS	Former name(s) Please provide any previous names	
Full forename(s)	ANY	which have been used for business purposes in the past 20 years	
		Married women do not need to give	
Surname	MARTIN	former names unless previously used for business purposes	
Former name(s) •		Continue in Section 6 if required	
Country/State of residence ©	UK	© Country/State of residence	
Date of birth	10 1 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	This is in respect of your usual residential address as stated in Section 4a	
Appointment type	Are you being appointed as a designated member?	Section 4a Appointment type	
	Yes	Your designation must match the status of the LLP	
	₩ No	status of the EE	
4	New member's service address O		
	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	16B	have to be your usual residential	
Street	PARKMAN	address. Please state 'The LLP's Registered	
	PORTERS MODE	Office' if your service address is recorded in the LLP's register of	
Post town	ST ALBANS	members as the LLP's registered office If you provide your residential	
County/Region	HELTFOLDSHILE		
Postcode	AL131 161P A1	address here it will appear on the	
Country	l UK	public 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	i I
lew member's Ignature	× A. Wardel	
Authorising signature	Signature X	
	This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
ormer names 0		Additional former names Use this space to enter any additional names
	1	<u> </u>

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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
Company name HANBURYS
Address 6B PARKWAY
PORTERS WOOD
Post town ST. ALBANS
County/Region HERTFORDSHIRE
Postcode A L 3 6 P A
U.K.
DX
Telephone

✓ 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