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
You cannot use the form
appoint a corporate mer
do this, please use form
'Appointment of a corpo
member of a Limited Lia
Partnership (LLP)'



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1	LLP	deta	ails	5								
LLP number	0	С	3	6	8 6	5	6	5	→ Filling in this form Please complete in typescript or in			
LP name in full	Fan	nilies	s fo	r Ch	ııldren	bold black capitals						
						All fields are mandatory unless specified or indicated by *						
2			m	eml	oer's a	appo	oint	nent				
Date of appointment	d O	^d 1		Tri	1 "1		^y 2	y0 y1 y1				
3	Nev	v me	em	ber	's det	ails						
Title *	Mrs								• Former name(s)			
Full forename(s)	Rac	hel					·		Please provide any previous names which have been used for business purposes in the past 20 years			
Surname	Ash	ton							Married women do not need to give 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 This is in respect of your usual			
Date of birth	^d 2	^d 2		m	о ™з		^y 1	^y 9 ^y 7 ^y 3	residential address as stated in Section 4a			
Appointment type 9	Are	you b Yes	bein	ıg ap	pointe	Appointment type Your designation must match the						
	✓ No		status of the LLP									
4	Nev	v me	em	ber	's ser	vice	add	ress o				
								ss below You must also complete dress in Section 4a	Service address This is the address that will appear on the public record This does not			
Building name/number	-								have to be your usual residential			
Street	The	LLP	o's l	Reg	stered	d Off	ice	1 (address Please state 'The LLP's Registered Office' If your service address is			
Post town									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			
County/Region Postcode	<u> </u>		<u> </u>		_							
Country					-				public record			

LL APO1
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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X ABM.	, ,
Authorising signature	Signature X This form may be signed and authorised by Designated member, Judicial factor	
5	Additional former names (continued from Section 3)	
Former names •		◆ Additional former names Use this space to enter any additional names

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Presenter information	! Important 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.	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.
Contact name	☑ Where to send
Company name	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below
Address	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ
Post town	DX 33050 Cardiff
County/Region Postcode Country	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
DX	or LP - 4 Edinburgh 2 (Legal Post)
Telephone	For LLPs registered in
✓ Checklist	Northern Ireland
We may return forms completed incorrectly or with information missing	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
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	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
 You have provided both the service address and the usual residential address 	<i>†</i> Further information
 □ 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 	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk
business purposes over the last 20 years You have enclosed a relevant Section 243 application if applying for this at the same time as	This form is available in an alternative format. Please visit the
completing this form The new member has signed the form	forms page on the website at
An authorising signature has been given by a designated member	www.companieshouse.gov.uk