In accordance with Section 9 of the Limited Liability Partherships 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 You cannot use the for appoint a corporate mido this, please use for 'Appointment of a corporate member of a Limited Li Partnership (LLP)'



A42 27/01/2012 COMPANIES HOUSE #201

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1	LLP	det	aıls											
LLP number	O C 3 6 8 5 6 5									→ Filling in this form Please complete in typescript or in				
LP name in full	Fan	nilies	s for	Chil	bold black capitals.									
				_	All fields are mandatory unless specified or indicated by *									
2	Dat	e of	mei	mbo	er's a	appo	int	ment						
Date of appointment	d O	^d 1		^m 1	^m 1	_	^y 2	y 0 /	1 y 1					
3	Nev	v me	emb	er's	det	aıls								
Title *	Miss	S	•								Please provide any previous names which have been used for business purposes in the past 20 years			
Full forename(s)	Lau	ra												
Surname	Woolgar								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 1	^d 1		"1	"ხ		^y 1	9 7	8 ^y 7		residential address as stated in Section 4a			
Appointment type	Are you being appointed as a designated member? Yes No									Appointment type Your designation must match the status of the LLP				
4	Nev	v me	emb	er's	ser	vice	add	ress o						
									You must also section 4a	complete	Service address This is the address that will appear on the public record This does not			
Building name/number	name/number										have to be your usual residential address. Please state 'The LLP's Registered Office' if your service address is			
Street	The LLP's Registered Office													
Post town										recorded in the LLP's register of members as the LLP's registered office				
County/Region											If you provide your residential			
Postcode			<u> </u>			<u> </u>	<u>L</u> .				address here it will appear on the public record			
Country											·			

LL APO1
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Signatures	
I consent to act as member of the above named LLP	-
Signature X	K
Signature X This form may be signed and authorised by Designated member, Judicial factor	
Additional former names (continued from Section 3)	
	Additional former names Use this space to enter any additional names
	- -
	- <u> </u>
	Signature Signature X This form may be signed and authorised by Designated member, Judicial factor

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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 Address Post town County/Region Postcode Country DX 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

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

f 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

You have completed the appointment type
 You have indicated if you are a designated member
 You have provided both the service address and the

☐ You have included all former names used for business purposes over the last 20 years

☐ You have enclosed a relevant Section 243

The new member has signed the form
 An authorising signature has been given by a

☐ 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

application if applying for this at the same time as

usual residential address

completing this form

designated member