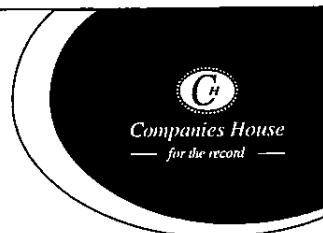


# LL AP01

## 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 Liability  
Partnership (LLP)'

THURSDAY



A17 \*AU2G9MAR\* 309  
05/08/2010  
COMPANIES HOUSE

### 1 LLP details

LLP number	0 C 3 0 2 5 5 4
LLP name in full	CONNECTED - UK COM LLP

→ **Filing in this form**  
Please complete in typescript or in  
bold black capitals.  
  
All fields are mandatory unless  
specified or indicated by \*

### 2 Date of member's appointment

Date of appointment	d 1 m 0 y 2 0 1 0
---------------------	-------------------

### 3 New member's details

Title *	MRS
Full forename(s)	STELLA MONIQUECA ALICE
Surname	DOWER
Former name(s) ①	
Country/State of residence ②	U. K
Date of birth	d 2 m 0 y 1 9 6 5
Appointment type ③	Are you being appointed as a designated member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

① **Former name(s)**  
Please provide any previous names  
which have been used for business  
purposes in the past 20 years  
  
Married women do not need to give  
former names unless previously used  
for business purposes  
  
Continue in Section 6 if required  
  
② **Country/State of residence**  
This is in respect of your usual  
residential address as stated in  
Section 4a  
  
③ **Appointment type**  
Your designation must match the  
status of the LLP

### 4 New member's service address ④

Please complete the service address below You must also complete the member's usual residential address in Section 4a	
Building name/number	22
Street	SAVILE ROAD
Post town	HALIFAX
County/Region	W YORKSHIRE
Postcode	H X 1 2 E Y
Country	U. K

④ **Service address**  
This is the address that will appear  
on the public record This does not  
have to be your usual residential  
address.  
  
Please state 'The LLP's Registered  
Office' if your service address is  
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  
public record

# LL AP01

## 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 

X

Authorising signature

Signature

X 

X

This form may be signed and authorised by Designated member, Judicial factor

6

### Additional former names (continued from Section 3)

Former names ①


① Additional former names  
Use this space to enter  
any additional names

**LL AP01****Appointment of member of a Limited Liability Partnership (LLP)****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

CHAPPEL COLE &amp; CO

Address

HERITAGE HOUSE

34 NORTH CRAY ROAD

Post town

BEXLEY

County/Region

KENT

Postcode

DA5 3LZ

Country

ENGLAND

DX

Telephone

01322 555220

**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](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.companieshouse.gov.uk)