

Please complete in typescript, or in bold black capitals.

CHWP000

LLP288a

(LLP Act 2000 Section 9)

Appointment of a Member to a Limited **Liability Partnership**

(NOT for terminating membership (use Form LLP288b) or change of particulars (use Form LLP288c))

LLP Number	OC305898
Full Name of Limited Liability Partnership	MANCHES LLP
Date of appointment * Voluntary Information * Member Reference Number * (As advised by Companies House)	Day Month Year O 1 0 3 2 0 0 4 Day Month Year Date of 5 1 0 5 4
Peers or others known by a title may use the title instead of or in addition to their name Surname or Corporate name Forename(s)	BOND JULIE
Usual residential address ***	30 BROAD FIELD ROAD
** Tick this box if the address	YARNTON
shown is a service address Post town for the	OXFORD Postcode OX5 (UL
beneficiary of a Confidentiality Order granted County / Region	OXFORDSHIRE Country UK
under section 723B of the Companies Act 1985 otherwise, give your usual Designated member (Please tick appropriate box)	YES NO I consent to act as a member of the above named limited liability partnership
residential address. In the case of a corporation, give the registered or principal office	Another Member being a Designated Member must sign and date the form in the boxes below.
address. Signed	Date 7-7.04
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact	Manches LLP Aldwych House 81 Aldwych London WC2B 4RP
the form. The containing	Tel 020 7404 4433 E-mail
	Nhen you have completed and signed the form please send it to the Registrar of Companies at:
COMPANIES HOUSE 05/03/04 Form April 2002	Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for partnerships registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for partnerships registered in Scotland DX ED235 Edinburgh