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

LL CH01

Change of details of a member of a Limited Liability Partnership (LLP)

✓ What this form is for

You may use this form to change the
details of an individual person who

Is a member.

The property of the person who is a member.

The property of the person who is a member.

The property of the person who is a member.

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What this form is NO'
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the details of a corpora
To do this, use form LL (
'Change of details of a
member of a Limited Lia
Partnership'



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#204

LLP details Filling in this form LLP number C 3 Please complete in typescript or in LLP name in full bold black capitals LAWRENCE GRAHAM LLP All fields are mandatory unless specified or indicated by * Member's current details on the Register O • Current details ^d1 Date of birth * 2 ^mo This information is used to identify your details on the LLP record Title * MR Providing a date of birth will help us identify the correct person on Full forename(s) SIMON JAMES the public record. This is voluntary information and if completed it will Surname **ELPHICK** be placed on the public record Date of change of details Date of change ^y 0 of details Please complete the appropriate sections to indicate which of your details have changed Change of name details New name Title 1 Please enter your new name Full forename(s) @ Surname 2 5 Change of service address 9 Service address Building name/number This is the address that will appear Street on the public record. This does not have to be your usual residential Please state 'The LLP's Registered Post town Office' if your service address is County/Region recorded in the company's register of members as the LLP's registered Postcode Country If you provide your residential address here it will appear on the I confirm that there has been no change in the LLP's register of members' public record residential addresses Please complete Section 5a if your usual residential address has changed

> CHFP021 05/10 Version 4 0

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| 6 | Change of country/state of residence | | | |
|--|--|-------------|---|--|
| Change of country/ state of residence | | | | |
| 7 | Change of status of member | | | |
| | I consent to act as a ● designated member member of the above named LLP | | Change of status Please tick one box Consent signature Please sign to indicate your consent to the change of status Please only sign here if you are changing your status as a member | |
| Member's consent signature ② | Signature | X | | |
| 8 | Authorising signature ® | | | |
| | This must be completed in all cases | | • Authorising signature This must be signed in all cases | |
| | I am signing this form on behalf of the LLP | | | |
| Signature | Signature | × | | |
| | This form may be signed by Designated member, Judicial factor | | | |

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| however for expediency we advise you to to the appropriate address below. |
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| return this form to any Companies House however for expediency we advise you to to the appropriate address below. |
| however for expediency we advise you to to the appropriate address below. |
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| registered in England and Wales: trar of Companies, Companies House, ay, Cardiff, Wales, CF14 3UZ Cardiff registered in Scotland trar of Companies, Companies House, or, Edinburgh Quay 2, tainbridge, Edinburgh, Scotland, EH3 9FF Edinburgh 1 Edinburgh 2 (Legal Post) registered in Northern Ireland. strar of Companies, Companies House, oor, The Linenhall, 32-38 Linenhall Street, lorthern Ireland, BT2 8BG R Belfast 1 243 exemption applying for, or have been granted, a section intion, please post this whole form to the postal address below strar of Companies, PO Box 4082, F14 3WE ther information er information, please see the guidance notes ebsite at www.companieshouse.gov.uk |
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