

(Section 2 LLP Act 2000)

Application for Incorporation of a Limited Liability Partnership

Please complete in typescribt or in bold black capitals.

CHFP010

Please leave this box blank

Full Name of Limited Liability Partnership

Situation of Registered Office

	<u> </u>	<u> </u>	·	 	
PROFRED	PARTNERS	LLP			·

Insert "England and Wales", "Wales" or "Scotland"

PO Box number only is not acceptable

Registered Office Address

Post town

County / Region

12 PLUMTREE COURT	
LONDON	
	Postcode EC4A 4HT

Will all Members from time to time be designated members?

(List members overleaf)

1	

YES

ENGLAND AND WALES

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If no, at least two of the listed members must be designated members

Number of continuation sheets attached to this application for incorporation

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1		
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l certif	y that I am a: (Please tick appropriate box)
	Solicitor engaged in the formation of this LLF
/	Member named overleaf of the LLP

And that the two or more persons named overleaf are associated for carrying on a lawful business with a view to profit.

Signed

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 information that you give will be visible to searchers of the public record.



Form April 2002

185	Danns.	

Date

The Company Secretarial Department, EP7 - 12 Plumtree

Court, London, EC4A 4HT

Tel

E-mail

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ

for partnerships registered in England and Wales

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for partnerships registered in Scotland

DX ED235 Edinburgh

∟ist of Memb	oers on Inc	orporation					
Peers or others known by a title use the title inste	•	Surname or Corporate name	BLOOMING HOLDINGS LIMITED				
of or in addition their name		Forename(s)					
_				Day	Month	Yea	ar
1		ference Number * by Companies House)		Date of Birth	1	1 1	
1	†† Usual re	sidential address	TWENTY TWO COLOMBERIE				
مط		red or principal office	TWENTT TWO GODDINERS				
au	aress in the	case of a corporation or Scottish firm)					
†† Tick this box address shown service address	is a	Post town	ST HELIER				-
the beneficiary Confidentiality granted under t	of a Order	County / Region	JERSEY Postcode JE1 4XA				
provisions of se 723B of the	ection	Country	CHANNEL ISLANDS				
Companies Act	1985		I consent to act as a member of the limited liability partnership named on page 1				
			(Please tick this box if consenting to act as a	a designated memb	per)		V
* Voluntary Information		Signed	As Faring.	Date	80	1/05	
			(Member to sign and date)				
Peers or others known by a title use the title inste		Surname or Corporate name	COLORFULL HOLDINGS LIMITED)		_	
of or in addition their name	to	Forename(s)					
				Day	Month	Yea	ar
I		eference Number * by Companies House)		Date of Birth			
	(or registe	esidential address ared or principal office	TWENTY TWO COLOMBERIE				
†† Tick this box		or Scottish firm)					
address shown service address	isa	Post town	ST HELIER				
the beneficiary Confidentiality granted under t	Order	County / Region	JERSEY	UK Postcode	JE1 4X	A	
provisions of s 723B of the Companies Act	ection	Country	CHANNEL ISLANDS				
			I consent to act as a member of the page 1	e limited liability	partnersh	nip named	d on
* Voluntary Information			(Please tick this box if consenting to act as a	a designated memb	per)		
		Signed	B Janna	Date	81	910!	5

(Member to sign and date)

NOTE: Unless there are at least two designated members, all members will be designated members



FILE COPY



CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership No. OC315167

The Registrar of Companies for England and Wales hereby certifies that PROFRED PARTNERS LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited.

Given at Companies House, Cardiff the 14 September 2005



