

003944/1140



Companies House

— for the record —

Please complete in typescript,  
or in bold black capitals.

CHWP000

LLP363

## Annual Return of a Limited Liability Partnership

LLP Number OC322783

Full Name of Limited  
Liability Partnership DEDHAM UNDERWRITERS LLP

### Date of this return

The information in this return  
is made up to

Day		Month		Year	
2	8	0	9	2	0
				0	9

### Date of next return

If you wish to make your next  
return on a date earlier than  
the anniversary of this return  
please show the date here.

Day		Month		Year	
2	8	0	9	2	0
				1	0

### Registered Office

Any change of  
registered office  
must be notified on  
Form LLP287.

Show here the address  
as at the date of  
this return.

FOUNTAIN HOUSE

130 FENCHURCH STREET

Post town LONDON

County

UK  
Postcode EC3M 5DJ

### Register of Debenture Holders

If there is a register of  
debenture holders, or a  
duplicate of any such  
register or part of it,  
which is not kept at the  
registered office, state  
here where it is kept

Post town

County

UK  
Postcode

### List members on page 2

**Certificate** As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

*[Signature]*  
FOR AND ON BEHALF OF ARGENTA LLP SERVICES LTD

Designated Member

Date

When you have signed the return send it  
with the fee to the Registrar of Companies.  
Cheques should be made payable to  
Companies House

This return includes 2 continuation sheets.

(enter number)



PC3

\*P0QEGE3Q\*

14/10/2009

493

COMPANIES HOUSE

le  
by

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

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

for partnerships registered in Scotland

DX 33050 Cardiff

DX 235 Edinburgh  
or LP - 4 Edinburgh 2

WEDNESDAY

## Members

Please list members in alphabetical order

*In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.*

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Surname or Corporate Name

ARGENTA CONTINUITY LIMITED

Forename(s)

Address ††

FOUNTAIN HOUSE, 130 FENCHURCH STREET

Post town

LONDON

County / Region

Country

ENGLAND

UK  
Postcode

EC3M 5DJ

Tick box if designated member

☒

Member Reference  
Number \*(as advised  
by Companies House)

82246

Date of Birth

Day Month Year

3 1 0 7 2 0 0 6

\* Voluntary  
information

## Members

Please list members in alphabetical order

*In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.*

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Surname or Corporate Name

ARGENTA LLP SERVICES LIMITED

Forename(s)

FOUNTAIN HOUSE, 130 FENCHURCH STREET

Address ††

Post town

LONDON

County / Region

Country

ENGLAND

UK  
Postcode

EC3M 5DJ

Tick box if designated member

☒

Member Reference  
Number \*(as advised  
by Companies House)

82247

Date of Birth

Day Month Year

3 1 0 7 2 0 0 6

\* Voluntary  
information

Please complete in typescript,  
or in bold black capitals.

CHWP000

# LLP363 cont

## Annual Return (continuation sheet)

LLP Number

### Members (Please list members in alphabetical order)

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

☐ <sup>††</sup> Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

#### Details of new members must be notified on form LLP288a

Surname or Corporate Name	<input type="text" value="Rolt"/>		
Forename(s)	<input type="text" value="Nicholas Lewis Evelyn"/>		
Address <sup>††</sup>	<input type="text" value="16 ter avenue du Docteur Faugoux, Le Parc du Perreux,"/> <input type="text" value="94170"/>		
Post town	<input type="text"/>		
County / Region	<input type="text" value="Le Perreux sur Marne"/>	UK	<input type="text"/>
Country	<input type="text" value="France"/>	Postcode	<input type="text"/>
		Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Day	Month	Year
<input type="text" value="0"/> <input type="text" value="3"/>	<input type="text" value="1"/> <input type="text" value="2"/>	<input type="text" value="1"/> <input type="text" value="9"/> <input type="text" value="4"/> <input type="text" value="8"/>

\* Voluntary information

### Members (Please list members in alphabetical order)

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.

☐ <sup>††</sup> Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

#### Details of new members must be notified on form LLP288a

Surname or Corporate Name	<input type="text" value="Rolt"/>		
Forename(s)	<input type="text" value="Christopher Xavier"/>		
Address <sup>††</sup>	<input type="text" value="16 ter avenue du Docteur Faugoux, Le Parc du Perreux,"/> <input type="text" value="94170"/>		
Post town	<input type="text"/>		
County / Region	<input type="text" value="Le Perreux sur Marne"/>	UK	<input type="text"/>
Country	<input type="text" value="France"/>	Postcode	<input type="text"/>
		Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Day	Month	Year
<input type="text" value="1"/> <input type="text" value="6"/>	<input type="text" value="0"/> <input type="text" value="5"/>	<input type="text" value="1"/> <input type="text" value="9"/> <input type="text" value="7"/> <input type="text" value="8"/>

\* Voluntary information

## Members

Please list members in alphabetical order

*In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.*

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	Rolt		
Forename(s)	Julian Alexander		
Address ††	16 ter avenue du Docteur Faugeron, Le Parc du Perreux,		
	94170		
Post town			
County / Region	Le Perreux sur Marne	UK	
Country	France	Postcode	
		Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day	Month	Year
1	2	0
6	1	9
8	0	

\* Voluntary information

## Members

Please list members in alphabetical order

*In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name.*

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name			
Forename(s)			
Address ††			
Post town			
County / Region		UK	
Country		Postcode	
		Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day	Month	Year

\* Voluntary information