

LLP288

Appointment of a Member to a Limited Liability Partnership

Please complete in typescript, or in bold black capitals. (NOT		for terminating membership (use Form LLP288b) or change of particulars (use Form LLP288c))
CHFP010	LLP Number	OC322935
Full Name of Limited Liability Partnership		Taylor Wessing Limited Liability Partnership
Information (A Peers or others known by a title ma use the title instead of or in addition to their name	Forename(s) ual residential address ††	Day Month Year 1 7 1 1 2 0 0 8 Day Month Year Date of Birth 0 4 0 8 1 9 7 3 Belcher William Robin 5 NEW STREET SQUARG
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, give the registered or principal office address.	Post town County / Region Designated member (Please tick appropriate box)	London Postcode Country YES X NO I consent to act as a member of the above named limited liability partnership
	Consent signature	Another Member being a Designated Member must sign and date the form in the boxes below.
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.		Date 112 2008 Designated Member Taylor Wessing LLP,
		Tel DX number 41 DX exchange London
DAY		When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff

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A75 19/12/2008 **COMPANIES HOUSE** Companies House, Crown Way, Cardiff, CF14 3UZ for partnerships registered in England and Wales or

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

for partnerships registered in Scotland

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