in accordance with ... Section 9 of the Limited Liability Partnerships Act 2000

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)



What this form is for You may use this form to appoint an individual as a member of an LLP

What this form is You cannot use the appoint a corpora' do this, please us 'Appointment of a member of a Limited Liability

01/03/2011 COMPANIES HOUSE A17 18/02/2011 COMPANIES HOUSE

uk

484

Partnership (LLP)' LLP details → Filling in this form LLP number С 3 2 5 6 8 2 0 Please complete in typescript or in bold black capitals LLP name in full BAINS COHEN SOLICITORS LLP All fields are mandatory unless specified or indicated by * Date of member's appointment ^y0 9 ^d 1 ٥3 Date of appointment ^y2 ^y0 New member's details 3 O Former name(s) Title * MS Please provide any previous names Full forename(s) which have been used for business DANIELLE HEDY purposes in the past 20 years Married women do not need to give former names unless previously used Surname LANE for business purposes Former name(s) 0 Continue in Section 6 if required Country/State of OCountry/State of residence UK residence @ This is in respect of your usual residential address as stated in Date of birth ^y9 ^y8 Section 4a Appointment type 9 Are you being appointed as a designated member? Appointment type Your designation must match the Yes status of the LLP ✓ No New member's service address o O Service address Please complete the service address below You must also complete This is the address that will appear the member's usual residential address in Section 4a on the public record. This does not Building name/number 61A have to be your usual residential address. Street **EAST STREET** Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of Post town **BARKING** members as the LLP's registered County/Region **ESSEX** If you provide your residential address here it will appear on the Postcode G Ε 1 public record Country

luk

LL APO1 Appointment of member of a Limited Liability Partnership (LLP)

5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X X	
Authorising signature	Signature X	
	This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names O		● Additional former names Use this space to enter any additional names

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

Presenter information	Important inf
You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.	Please note that all will appear on the p information relating addresses
Contact name YAIR COHEN	✓ Where to sen
Company name BAINS COHEN SOLICITORS LLP	You may return this address, however for return it to the appropriate to the second se
Address 61A EAST STREET	For LLPs registered
Post town DADICANO	England and Wales The Registrar of Comp Crown Way, Cardiff, V DX 33050 Cardiff
County/Region ESSEX	DX 33030 Caldill
Postcode I G 1 1 8 E J Country UK	For LLPs registered The Registrar of Comp Fourth floor, Edinburg
DX 8510 BARKING	139 Fountainbridge, E DX ED235 Edinburgh or LP - 4 Edinburgh 2
0208-252-7373	For LLPs registered
₹ Checklist	Northern Ireland The Registrar of Comp
We may return forms completed incorrectly or with information missing	Second Floor, The Line Belfast, Northern Irela DX 481 N R Belfast 1
Please make sure you have remembered the following The LLP name and number match the information held on the public Register You have provided a correct date of birth You have completed the date of appointment You have completed the appointment type You have indicated if you are a designated member You have provided both the service address and the	Section 243 exempt If you are applying for 243 exemption, please different postal addres The Registrar of Comp Cardiff, CF14 3WE
usual residential address.	j Further inform
 Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number. You have included all former names used for 	For further information on the website at www or email enquiries@co
business purposes over the last 20 years You have enclosed a relevant Section 243	This form is a
application if applying for this at the same time as	alternative for
completing this form The new member has signed the form	forms page or
☐ An authorising signature has been given by a designated member	www.compan

ormation

information on this form ublic record, apart from to usual residential

form to any Companies House or expediency we advise you to ropriate address below

panies, Companies House, Wales, CF14 3UZ

ın Scotland

oanies, Companies House, h Quay 2, dinburgh, Scotland, EH3 9FF (Legal Post)

ın

panies, Companies House, enhall, 32-38 Linenhall Street, and, BT2 8BG

tion

r, or have been granted, a section e post this whole form to the ss below anies, PO Box 4082,

mation

n, please see the guidance notes w companieshouse gov uk impanieshouse gov uk

vailable in an rmat. Please visit the n the website at www.companieshouse.gov.uk