

LLP288

Appointment of a Member to a Limited

Oleans associate in temporalist	Liability Partners	hip
Please complete in typescript, or in bold black capitals. (NC	T for terminating membership (use Form LLP288b) or change of particulars (use Form LLP2	-
CHFP010 LLP Number	OC 325 738.	
Full Name of Limited		
Liability Partnership	·	
	Day Month Year	
Date of	12161015121010181	
appointment * Voluntary Member Reference Number *	Date of Control of Con	
Information (As advised by Companies House)		<u> 13</u>
Peers or others known by a title may use the title instead Sumame or Corporate name	1 1	
of or in addition to their name Forename(s)	HAFEEZ BOA	
Usual residential address (or registered or principal office	19 CHETWORE HOAD	
address in the case of a corporation or Scottish firm)	BOUTH CROYDON	
Post town	SURREY Postcode CR2 6 BI-1	
County / Region	Country UK	
Designated member (Please tick appropriate box)		
	I consent to act as a member of the above named limited liability partners	hip _
Consent signature	Manhan Date 27/03/200	8.
	Another Member being a Designated Member must sign and date the form in boxes below	n the
Signed	Twisty Deynes. Date 27/03/2008	ક
	Designated Member BASING HAZL LTD.	
Please give the name, address, telephone number and e-mail (if available) of the	BIBINICE LIV.	
person Companies House should contact if		
there is any query (DX addresses are acceptable for this purpose if you have	Tel	
one)	E-mail	
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03/04/2008 **COMPANIES HOUSE**

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