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 NOT f You cannot use the form t appoint a corporate meml do this, please use form l 'Appointment of a corpora

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		Partnership (LLP)'	A25	13/01/2012 #210	
1	LLP details				
LLP number	O C 3 3 6 2 4 0			→ Filling in this form Please complete in typescript or in bold black capitals	
LLP name in full	VISION CAPITAL LLP		а.	All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment				
Date of appointment	$\begin{bmatrix} d & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 1 & 0 \end{bmatrix} \begin{bmatrix} m & 0 & 0 \end{bmatrix} \begin{bmatrix} m & 1 & 0 \end{bmatrix} \begin{bmatrix} y & 0 & 0 \end{bmatrix} \begin{bmatrix} y & 0 & 0 \end{bmatrix}$	y 1 y 2			
3	New member's details				
Title *	MR			• Former name(s)	
Full forename(s)	SAMER			Please provide any previous names which have been used for business purposes in the past 20 years Married women do not need to give former names unless previously used for business purposes	
Surname	CORTAS				
Former name(s) •				Continue in Section 6 if required	
Country/State of residence •	UNITED KINGDOM			O Country/State of residence This is in respect of your usual	
Date of birth	^d 2 ^d 1	^y 7 ^y 6		residential address as stated in Section 4a	
Appointment type ⑤	Are you being appointed as a designated Yes No	d member?		Appointment type Your designation must match the status of the LLP	
4	New member's service address	0			
	Please complete the service address belo the member's usual residential address	ow You must also complete n Section 4 a		O Service address This is the address that will appear on the public record This does not	
Building name/number	54	•		have to be your usual residential address Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of members as the LLP's registered office	
Street	JERMYN STREET				
Post town	LONDON				
County/Region			If you provide your residential		
Postcode	S W 1 Y 6 L X			address here it will appear on the public record	
Country	UNITED KINGDOM			,	

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

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Presenter information	Important information
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 information on this form will appear on the public record, apart from information relating to usual residential addresses
Contact name MS FLAVIA HAINES	☑ Where to send
Company name VISION CAPITAL	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below
Address 54 JERMYN STREET	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ
Post town LONDON	DX 33050 Cardiff
Postcode S W 1 Y 6 L X Country UNITED KINGDOM DX	For LLPs registered in Scotland The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post)
020 7389 6431 ✓ Checklist	For LLPs registered in Northern Ireland The Registrar of Companies, Companies House,
We may return forms completed incorrectly or with information missing	Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG 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	Section 243 exemption If you are applying for, or have been granted, a section 243 exemption, please post this whole form to the different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE
☐ You have provided both the service address and the usual residential address	<i>i</i> Further information
□ 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 business purposes over the last 20 years	For further information, please see the guidance notes on the website at www companieshouse gov uk or email enquiries@companieshouse gov uk
☐ You have enclosed a relevant Section 243	This form is available in an
application if applying for this at the same time as completing this form	alternative format. Please visit the
☐ The new member has signed the form	forms page on the website at
designated member	www.companieshouse.gov.uk
☐ An authorising signature has been given by a	www.companieshouse.gov.uk