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Please complete in typescript,
or in bold black capitals.

CHWP000

Please leave this box blank

Full Name of Limited
Liability Partnership

Situation of Registered
Office

Registered Office
Address

Post town

PO Box number
only is not
acceptable

County / Region

Will all Members from time to
time be designated members?

(List members overleaf)

Number of continuation sheets
attached to this application for
incorporation

I certify that I am a (Please tick appropriate box)

☐

Solicitor engaged in the formation of this LLP

☒

Member named overleaf of the LLP

And that the two or more persons named overleaf are associated for
carrying on a lawful business with a view to profit

Signed

Date

21 AUG 2008

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

Cornwall Buildings, 45-51 Newhall Street
Office B3, Birmingham

B3 3QR

Tel 0121 222 4109

DX number

DX exchange

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
for partnerships registered in England and Wales or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for partnerships registered in Scotland DX 235 Edinburgh
or LP - 4 Edinburgh 2



A33

23/08/2008
COMPANIES HOUSE

330

SATURDAY

LLP2

(Section 2 LLP Act 2000)

Application for Incorporation of a Limited Liability Partnership

List of Members on Incorporation

Peers or others known by a title may use the title instead of or in addition to their name

Surname or Corporate name

CONSULTING GROUP CORP

Forename(s)

Member Reference Number *
(as advised by Companies House)

72217

Date of Birth Day Month Year

†† Usual Residential

Address (or registered or principal office address in the case of a corporation or

35 BARRACK ROAD
3RD FLOOR

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985



Post town

BELIZE CITY

County / Region

C A

UK Postcode

Country

BELIZE

I consent to act as a member of the limited liability partnership named on page 1

(Please tick this box if consenting to act as a designated member)



* Voluntary information

Signed

Date

21 AUG 2008

(Member to sign and date)

Peers or others known by a title may use the title instead of or in addition to their name

Surname or Corporate name

TRADE INVEST SYSTEM LTD

Forename(s)

Member Reference Number *
(as advised by Companies House)

72218

Date of Birth Day Month Year

†† Usual Residential Address

(or registered or principal office address in the case of a corporation or Scottish firm

35 BARRACK ROAD
3RD FLOOR

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985



Post town

BELIZE CITY

County / Region

C A

UK Postcode

Country

BELIZE

I consent to act as a member of the limited liability partnership named on page 1

(Please tick this box if consenting to act as a designated member)



* Voluntary information

Signed

Date

21 AUG 2008

(Member to sign and date)

NOTE Unless there are at least two designated members, all members will be designated members



FILE COPY

**CERTIFICATE OF INCORPORATION
OF A
LIMITED LIABILITY PARTNERSHIP**

Partnership No. OC339669

The Registrar of Companies for England and Wales hereby certifies that

ABORIDE ALLIANCE LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited.

Given at Companies House on **28th August 2008**.



Companies House
— for the record —



THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES