

Companies House

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(Section 2 LLP Act 2000)

or LP - 4 Edinburgh 2

Application for Incorporation of a Limited

or in bold black capitals.	Liability Partnership
CHWP000	
Please leave this box blank	00341866
Full Name of Limited Liability Partnership	EXETER LASER EYE SURGEONS [1]
Situation of Registered Office	ENG (AND AND WALES Insert "England and Wales", "Wales" or "Scotland"
Registered Office Address	45 DENMARK ROAD
Post town	EXETER
PO Box number County / Region only is not acceptable	BXXXX JEVON Dostcode EXI 15Q
Will all Members from time to time be designated members? (List members overleaf)	YES NO If no, at least two of the listed members must be designated members
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 15/11/08
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact vou if there is a query on the "A7MHQ5BQ" A26 02/12/2008 40 COMPANIES HOUSE "AAO3V55G" A39 26/11/2008 275 COMPANIES HOUSE	45 DENMARK ROAD EXETEN EXI 150 Tel 01392 4958)4
	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
	Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for partnerships registered in Scotland. DX 235 Edinburgh

List of Members on Incorporation		
	Surname or Corporate name Forename(s)	BYLES DANIEL GELLZEVILLE
	per Reference Number * (as advised by Companies House)	Date of Day Month Year Birth 2 6 0 6 1 9 6 5
	** Usual Residential Address (or registered or principal office address in the case of a corporation or	8 SAMING CRESCENT
	Post town	EXETER
	County / Region	1000 UK Postcode EX / 17L
	Country	ENGLAND
		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 16/11/08
		(Member tó sign and date)
(Surname or Corporate name	Quinn
	Forename(s)	ANTHONY GERARD
	per Reference Number * (as advised by Companies House)	Date of Day Month Year Birth 16071959
†† Tick this box if the	iual Residential Address (or registered or principal office address in the case of a corporation or Scottish firm	29 MATTORD AVENUE
	Post town	EXETER
	County / Region	DEVON OST DEX EX2 4PL
	Country	ENGLAND
		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)
	Signed	Date 16/11/08
		(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. OC341866

The Registrar of Companies for England and Wales hereby certifies that

EXETER LASER EYE SURGEONS 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 4th December 2008.



