In accordance with section 854 of the Companies Act 2006 as applied by the Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009

LL AR01

Annual Return of a Limited Liability Partnership (LLP)



A fee is payable with this form Please see 'How to pay' on the last page

✓ What this form is for

You may use this form to confirm that the LLP information is correct as at the date of this return You must file an Annual Return at least once every year

What this form is NOT for

You cannot use this form to ginotice of changes to the LLP members, the registered office address or information relatinithe company records



A39

30/03/2010 142

	the company records	COMPANIES HOUSE	
Part 1	LLP details	→ Filling in this form Please complete in typescript or in	
	This section must be completed by all LLPs	bold black capitals All fields are mandatory unless	
		specified or indicated by *	
A1	LLP details		
LLP number	O C 3 4 3 6 4 8	LLP name change If your LLP has changed its name,	
LLP name in full 🗨	AARJAY LLP	please provide the LLP name as at the date of this return	
A2	Return dates	② Date of this return	
	Please give the annual return made up date The return date must not be a future date The annual return must be delivered within 28 days of the date given below	Your LLP's return date is usually the anniversary of incorporation or the anniversary of the last annual return filed at Companies House You may	
Date of this return •	d2 d6 m0 m2 y2 y0 y1 y0	choose an earlier return date but it must not be a later date	
A3	Registered office address o		
	Please give the registered office address of your company	Change of registered office This must agree with the address that is held on the Companies House records at the date of this return If the registered office address has	
Building name/number	4-5		
Street	LOVERIDGE MEWS		
		changed, you should complete form LL AD01 and submit it together with	
Post town		this annual return	
County/Region	LONDON		
Postcode	NW6 2DP		
A4	Single alternative inspection location (SAIL) of the LLP records (if applicable) •		
Building name/number		O SAIL address	
Street		This must agree with the address that is held on the Companies House records at the date of this return If the address has changed, you should complete form LL AD02 and	
Post town			
County/Region		 submit it together with this annual return 	
Postcode			

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A5	Location of LLP records •	
A5	Please tick the appropriate box to indicate which records are kept at the SAIL address in Section A4 Register of members Register of debenture holders Instruments creating charges and register of charges England and Wales or Northern Ireland Instruments creating charges and register of charges Scotland	O Location of LLP records If the LLP records are held at the registered office address, do not tick any of the boxes in this section Certain records must be kept by every LLP while other records are only kept where appropriate If the records are not kept at the SAIL address they must be available at the registered office If any of the LLP records have moved from the registered office to the address in Section A4 since the last

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Part 2 Officers of the LLP

This section should include details of the LLP members at the date to which this annual return is made up

- → For a member who is an individual, go to Section B1
- → For a corporate member, go to Section C1

Once Part 2 has been completed, please go to Part 3 'Signature'

Continuation pages

Two pages have been included in the form for details of members who are individuals and two pages have been included for details of corporate members

Please use a continuation page if you need to enter any more officer details

Member

Title* MR Full forename(s) JAYANTKUMAR VINODLAL Surname DOSHI Former name(s) UNITED KINGDOM Designated member Please tick this box if you are a designated member with his box if you are a designated member with his box if you are a designated member with his purposes during the period of this return Marned women do not need to give former name unless previously used for burpurposes Member's service address Building name/number Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z	Member details •	
Title* MR Full forename(s) JAYANTKUMAR VINODLAL Surname DOSHI Former name(s) UNITED KINGDOM Designated member Please tick this box if you are a designated member with his box if you are a designated member with his box if you are a designated member with his purposes during the period of this return Marned women do not need to give former name unless previously used for burpurposes Member's service address Building name/number Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z		
Full forename(s) Surname DOSHI Former name(s) Image: service address Member's service address Member's service address Nursery Gardens Member's service address Nursery Gardens Street Nursery Gardens Nursery Gardens Nursery Gardens Nursery Gardens Street Nursery Gardens Nursery Gardens Residence Nursery Gardens Nursery Gardens Residence Ocoprate details Please use Section C1-C4 to e corporate member details All details must agree with the previously notified to Companie form £L CH01 Former name(s) Please trick this box if you are a designated member Please provide any previous or which have been used for bur purposes during the period of this return Married women of not need to give former name unless previously used for bur purposes Building name/number 3 Street Nursery Gardens Goffs Oak Post town Waltham Cross County/Region Hertfordshire Postcode E N 7 6 R Z	MR	complete form LL AP01 and submit i
Surname DOSHI Former name(s) Country/State of residence UNITED KINGDOM Date of birth	JAYANTKUMAR VINODLAL) -
All details must agree with the previously notified to Compart House if you have made charsen and have not notified us, please complete form LL CH01 Date of birth Designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please provide any previous or which have been used for bus purposes during the period of this return Married womend not need to give former name unless previously used for bus purposes Building name/number Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z	розні	Please use Section C1-C4 to enter
Date of birth Date of birth Designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please provide any previous r which have been used for bus purposes during the period of this return Married women of not need to give former name unless previously used for bus purposes Building name/number NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS This information will appear of public record This information will appear of public record		All details must agree with those previously notified to Companies
Date of birth Designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please tick this box if you are a designated member Please provide any previous rich which have been used for bus purposes during the period of this return Married women dinot need to give former name unless previously used for bus purposes Member's service address Building name/number 3 Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z Postcode Postco	UNITED KINGDOM	
Designated member Please tick this box if you are a designated member Which have been used for bus purposes during the period of this return Married women d not need to give former name unless previously used for bus purposes Building name/number 3 Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode Postcode Post town Postcode Post town Postcode	^d 2 ^d 0 ^m 0 ^m 7	⊘ Former name(s)
Building name/number 3 Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z OIf you have previously notified Companies House that the se address is at 'The LLP's register office', please state 'The LLP's registered office' in the address of the LLP's registered office' in the address of the LLP's r	<u> </u>	which have been used for business purposes during the period of this return. Married women do not need to give former names unless previously used for business.
Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z Companies House that the se address is at 'The LLP's register office', please state 'The LLP's registered office' in the address office' in the address office' in the address office' in the address of the LLP's registered office' in the addres	Member's service address [©]	
Street NURSERY GARDENS GOFFS OAK Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z Address is at 'The LLP's registred office', please state 'The LLP's registered office' in the address is at 'The LLP's registred office' in the address is at 'The LLP's registred office' in the address is at 'The LLP's registred office', please state 'The LLP's registred office' in the address is at 'The LLP's registred office' in the address is at 'The LLP's registred office', please state 'The LLP's registred office' in the address is at 'The LLP's r	r 3	If you have previously notified
Post town WALTHAM CROSS County/Region HERTFORDSHIRE Postcode E N 7 6 R Z	NURSERY GARDENS	address is at 'The LLP's registered
County/Region HERTFORDSHIRE Postcode E N 7 6 R Z	GOFFS OAK	office', please state 'The LLP's registered office' in the address
Postcode E N 7 6 R Z	WALTHAM CROSS	This information will appear on the
	HERTFORDSHIRE	public record
Country UNITED KINCDOM	EN76RZ	
Country ONTIED KINGDOW	UNITED KINGDOM	
Country		For a corporate member, complete Sections C1-C4 MR JAYANTKUMAR VINODLAL DOSHI UNITED KINGDOM d2 d0 m0 m7 y1 y9 y5 y1 Please tick this box if you are a designated member Image: Service address for the service addre

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Member

B1	Member details •	
	Please use this section to list all the members of the LLP For a corporate member, complete Sections C1-C4	• Member appointments You may not use this form to appoint a member To do this, please
Title*	MRS	complete form LL AP01 and submit it together with this annual return
Full forename(s)	RASHILA JAYANTKUMAR	Corporate details
Surname	DOSHI	Please use Section C1-C4 to enter corporate member details
Former name(s) 9		Member details All details must agree with those previously notified to Companies
Country/State of residence	UNITED KINGDOM	House If you have made changes since the last annual return and have not notified us, please complete form LL CH01
Date of birth	d 0 d 6 m 9 y 1 y 9 y 5 y 1	⊘ Former name(s)
Designated member	Please tick this box if you are a designated member	Please provide any previous names which have been used for business purposes during the period of this return. Married women do not need to give former names unless previously used for business purposes.
B2	Member's service address O	
Building name/numbe	r 3	If you have previously notified
Street	NURSERY GARDENS	Companies House that the service address is at 'The LLP's registered
	GOFFS OAK	office', please state 'The LLP's registered office' in the address
Post town	WALTHAM CROSS	This information will appear on the public record
County/Region	HERTFORDSHIRE	
Postcode	EN76RZ	
Country	UNITED KINGDOM	

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Corporate member

C1	Corporate member details •		
	Please use this section to list all the corporate members of the LLP Please complete Sections C1-C4	O Corporate member appointments You may not use this form to appoint a corporate member To do this,	
Name of corporate body/firm		please complete form LL AP02 and submit it together with this annual return	
Building name/number		Corporate member details All details must agree with those	
Street		previously notified to Companies House If you have made changes since the last annual return and have not notified us, please complete	
Post town		form LL CH02	
County/Region			
Postcode			
Country			
Designated member	Please tick this box if you are a designated member		
C2	Location of the registry of the corporate body or firm		
	Is the corporate member registered within the European Economic Area (EEA)?		
	 → Yes Complete Section C3 only → No Complete Section C4 only 		
C3	EEA companies 2		
	Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register	● EEA A full list of countries of the EEA can be found in our guidance	
Where the company/ firm is registered 9		www.companieshouse.gov.uk This is the register mentioned in Article 3 of the First Company Law	
Registration number		Directive (68/151/EEC)	
C4	Non-EEA companies		
	Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	O Non-EEA Where you have provided details of the register (including state) where the company or firm is registered,	
Legal form of the corporate body or firm		you must also provide its number in that register	
Governing law			
If applicable, where the company/firm is registered •			
If applicable, the registration number			

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Corporate member

C1	Corporate member details o	
	Please use this section to list all the corporate members of the LLP Please complete Sections C1-C4	O Corporate member appointments You may not use this form to appoint a corporate member To do this,
Name of corporate body/firm		please complete form LL APO2 and submit it together with this annual return
Building name/number		Corporate member details All details must agree with those
Street		previously notified to Companies House If you have made changes since the last annual return and have not notified us, please complete
Post town		form LL CH02
County/Region		This information will appear on the public record
Postcode		
Country		
Designated member	Please tick this box if you are a designated member	
C2	Location of the registry of the corporate body or firm	
	Is the corporate member registered within the European Economic Area (EEA)?	
	→ Yes Complete Section C3 only→ No Complete Section C4 only	
C3	EEA companies [©]	
	Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register	② EEA A full list of countries of the EEA can be found in our guidance www.companieshouse.gov.uk
Where the company/ firm is registered 9		This is the register mentioned in Article 3 of the First Company Law
Registration number		Directive (68/151/EEC)
C4	Non-EEA companies	
	Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	• Non-EEA Where you have provided details of the register (including state) where the company or firm is registered,
Legal form of the corporate body or firm		you must also provide its number in that register
Governing law		
If applicable, where the company/firm is registered •		
If applicable, the registration number		

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LL AR01 Annual Return of a Limited Liability Partnership (LLP) Have you completed all the LLP officer details? → Yes Go to Part 3 'Signature' → No Please make sure all the officer details, at the time of this return, have been completed Part 3 Signature This must be completed by all LLPs I am signing this form on behalf of the LLP Signature Signature This form may be signed by Designated member, Judicial factor

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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
Contact name	C III
Company name ANDERSON SHAW	£ How to pay
	A fee of £30 is payable to Companies House in respect of an Annual Return of an LLP
Address 4/5 LOVERIDGE MEWS	Make cheques or postal orders payable to 'Companies House'
	☑ Where to send
Post town County/Regron LONDON	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below
Postcode N W 6 2 D P Country UNITED KINGDOM DX	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff
Checklist We may return forms completed incorrectly or with information missing	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
Please make sure you have remembered the following The LLP name and number match the information held on the public Register You have not used this form to make changes to the registered office address You have not used this form to make changes to members' details	or LP - 4 Edinburgh 2 (Legal Post) For LLPs registered in Northern Ireland The Registrar of Companies, Companies House, First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS DX 481 N R Belfast 1
☐ You have signed the form	i Further information
You have enclosed the correct fee	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk
	This form is available in an

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alternative format. Please visit the

forms page on the website at www.companieshouse.gov.uk