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 for You cannot use the form to appoint a corporate memb do this, please use form LI 'Appointment of a corpora member of a Limited Liabilist Partnership (LLP)'



\*LEXFMPL7\* LD4 02/12/2010 COMPANIES HOUSE

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	Partnership (LLP)'		
1	LLP details		
LLP number	O C 3 4 5 4 1 9	→ Filling in this form Please complete in typescript or in bold black capitals	
LLP name in full	Bradwell LLP		
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	d 0 d 3 d 3 d 1 d 2 d 3 d 4 d 3 d 4 d 4 d 4 d 4 d 4 d 4 d 4		
3	New member's details		
Title *	Mr	• Former name(s)	
Full forename(s)	Mark David	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	Thompson		
Former name(s) •		Continue in Section 6 if required	
Country/State of residence <b>②</b>	United Kingdom	Ocountry/State of residence This is in respect of your usual residential address as stated in Section 4a	
Date of birth	$\begin{bmatrix} ^{d}1 & ^{d}8 & \end{bmatrix} ^{m}0 \begin{bmatrix} ^{m}1 &                                   $		
Appointment type	Are you being appointed as a designated member?    Yes	Appointment type     Your designation must match the	
	□ No	status of the LLP	
4	New member's service address O		
	Please complete the service address below You must also complete the member's usual residential address in <b>Section 4a</b>	O Service address  This is the address that will appear on the public record. This does not	
Building name/number	The LLP's Registered Office	have to be your usual residential	
Street		address  Please state The LLP s Registered	
	-	Office' if your service address is recorded in the LLP's register of	
Post town		members as the LLP's registered office	
County/Region		If you provide your residential	
Postcode		address here it will appear on the public record	
Country		·	

## **LL** APO1 Appointment of member of a Limited Liability Partnership (LLP)

5	Signatures	
	I consent to ac as member of the above named LLP	
New member's signature	Signature X	
Authorising signature	Signature X	
	This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names <b>O</b>		● 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	■ Where to send	
Company name	You may return this form to any Companies Hous address, however for expediency we advise you t return it to the appropriate address below	
Post tovo	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ	
County/Regiun  Postcode  Country  DX	DX 33050 Cardiff  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)	
✓ 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	
<ul> <li>□ 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</li> <li>□ You have included all former names used for</li> </ul>	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk	
business purposes over the last 20 years  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	
An authorising signature has been given by a designated member	www.companieshouse.gov.uk	