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 member To do this, please use form LL APO2 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



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261

	Partnership (LLP)	
1	LLP details	
LLP number	0 C 3 4 6 0 9 9	Filling in this form Please complete in typescript or in
LLP name in full	Amins Beam AN + CO LLP	bold black capitals
		All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	0 4	
3	New member's details	
Title *	Mrs	• Former name(s) Please provide any previous names
Full forename(s)	SIMONE LAURA	which have been used for business purposes in the past 20 years.
Surname	SCHLAEFU - WESTERHUIS	Married women do not need to give former names unless previously used for business purposes
Former name(s) •	SIMONE LAURA WESTERHUIS.	Continue in Section 6 if required
Country/State of residence •	UNITED KINGDOM	Country/State of residence This is in respect of your usual
Date of birth	12 2 06 11 9 7 3	residential address as stated in Section 4a
Appointment type	Are you being appointed as a designated member?	Appointment type
	Yes No	Your designation must match the status of the LLP
	<u></u>	
4	New member's service address ©	
	Please complete the service address below You must also complete the member's usual residential address in Section 4a	Service address  This is the address that will appear
Building name/number	19 A	on the public record This does not have to be your usual residential
Street	LAITWOOD ROAD	address.  Please state 'The LLP's Registered
		Office' if your service address is recorded in the LLP's register of
Post town	LONDON	members as the LLP's registered
County/Region		office  If you provide your residential
Postcode	S W 1 2 9 0 N	address here it will appear on the
Country		Papie record
	UNITED KINGDOM	

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	× AWesterhis	
Authorising signature	× Pare 5 Tho,	
	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