In accordance with Section 9 of the Limited Liability Partnerships Act 2000

## LL CH01

## Change of details of a member of a Limited Liability Partnership (LLP)



What this form is for You may use this form to change the details of an individual person who is a member

X What this form is NOT for You cannot use this form to d the details of a corporate me To do this, use form LL CH02 'Change of details of a corpor



	member of a Limited Liability A-Partnership'	COMPANIES HOUSE
1	LLP details	
LLP number	00346156	→ Filling in this form Please complete in typescript or in bold black capitals  All fields are mandatory unless specified or indicated by *
LLP name in full	ABTEK TRADING LLP	
2	Member's current details on the Register ®	
Date of birth *	d d m m y y y	O Current details This information is used to identify your details on the LLP record
Title *		Providing a date of birth will help us identify the correct person on
Full forename(s)	RICHARD JOHN	the public record. This is voluntary
Surname	ATKINS	information and if completed it will be placed on the public record
3	Date of change of details	
Date of change of details	Please complete the appropriate sections to indicate which of your details have changed	
4	Change of name details	
Title *		New name Please enter your new name
Full forename(s) •		
Surname 🛮		
5	Change of service address <b>®</b>	
Building name/number		Service address This is the address that will appear
Street		on the public record This does not have to be your usual residential address
Post town		Please state 'The LLP's Registered Office' if your service address is
County/Region		recorded in the company's register of members as the LLP's registered
Postcode		office of members as the recus registered
Country	I confirm that there has been no change in the LLP's register of members' residential addresses	If you provide your residential address here it will appear on the public record  Please complete Section 5a if your usual residential address has changed

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Change of country/state of residence			
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Change of status of member			
I consent to act as a •  designated member member of the above named LLP		Change of status     Please tick one box     Consent signature     Please sign to indicate your consent to the change of status     Please only sign here if you are changing your status as a member	
Signature X	×		
Authorising signature <sup>©</sup>	•		
This must be completed in all cases  I am signing this form on behalf of the LLP		Authorising signature     This must be signed in all cases	
This form may be signed by Designated member, Judicial factor	<b>×</b>		
	Change of status of member    consent to act as a •     designated member     member     of the above named LLP    Signature     X	Change of status of member    consent to act as a	