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

LL APO1

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

X What this form is NOT You cannot use the form appoint a corporate merr do this, please use form 'Appointment of a corpor member of a Limited Liak



	Partnership (ULP)' [≤] A26	28/03/2012 #246
1	LLP details	COMPANIES HOUSE
LP number	0 0 3 5 4 3 2 4	→ Filling in this form Please complete in typescript or in
LIP name in full	A QUA MEESON LLP	bold black capitals.
		All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	10 1 10 1 12 10 1 1 10° 1 1° 10° 10	
3	New member's details	
Title *	ms	Former name(s) Please provide any previous names
Full forename(s)	SARAH	which have been used for business purposes in the past 20 years.
		Marmed women do not need to give
Surname	WINFIELD	former names unless previously used for business purposes.
Former name(s) •		Continue in Section 6 if required.
Country/State of residence €	UK	Country/State of residence This is in respect of your usual
Date of birth	114 6 4 11944	residential address as stated in Section 4a.
Appointment type®	Are you being appointed as a designated member?	Appointment type
	Yes	Your designation must match the status of the LLP
	I⊋∕ No	
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.	O Service address This is the address that will appear on the public record This does not
Building name/number	1 14/	have to be your usual residential address.
Street	COMMERCIAL ROAD	Please state 'The LLP's Registered
		Office' if your service address is recorded in the LLP's register of
Post town	POOLE	members as the LLP's registered office If you provide your residential
County/Region	DORSET	
Postcode	BHI 4 OHU	address here it will appear on the public record.
Country	UX	

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	X S. Winfield X	
Authorising signature	Signature X This form rray be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names 0		Additional former names Use this space to enter any additional names.