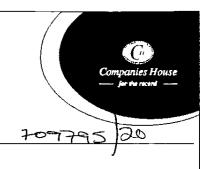
In accordance with Section 2 of the Limited Liability Partnership Act 2000 and the relevant provisions of the Companies Act 2006 as applied to Limited Liability Partnerships

LL IN01

Application for the incorporation 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 incorporate a Limited Liability Partnership
- What this form is NOT for You cannot use this form to incorporate a company To do please use form IN01 'Application register a company'



05/06/2010 **COMPANIES HOUSE**

Part 1 LLP details

> → Filling in this form Please complete in typescript or in bold black capitals

All fields are mandatory unless

		specified or indicated by *	
A1	LLP details		
	Please show the proposed LLP name below	Duplicate names Duplicate names are not permitted	
LLP name in full ¹⁰	SCOTT-OTWAY	You must delete either LLP or Limited Liability Partnership	
Name ending 🗗	LLP/kannadeubdvalashtyc/Sextroecedcep	If the LLP is situated in Wales and you chose to have a Welsh ending (PAC or	
For official use		Partneriaeth Atebolrwydd Cyfyngedig) please use form LL IN01c	
A2	LLP name restrictions		

Please tick the box only if the proposed LLP name contains sensitive or restricted words or expressions that require you to seek comments of a government department or other specified body

☐ I confirm that the proposed company name contains sensitive or restricted words or expressions and that approval, where appropriate, has been sought of a government department or other specified body and I attach a copy of their response

OLLP name restrictions

A list of sensitive or restricted words or expressions that require consent can be found in guidance available on our website www.companieshouse.gov.uk

A3 Situation of registered office o

> Please tick the appropriate box below that describes the situation of the proposed registered office (only one box must be ticked)

- **England and Wales**
- Wales
- Scotland
- Northern Ireland

Registered office

Every LLP must have a registered office and this is the address to which the Registrar will send correspondence

For England and Wales LLPs, the address must be in England or Wales

For Welsh, Scottish or Northern Ireland LLPs, the address must be in Wales, Scotland or Northern Ireland respectively

A4	Registered office address •	
	Please give the registered office address of your LLP	• Registered office address You must ensure that the address
Building name/number	THE WHITE HOUSE	shown in this section is consistent with the situation indicated in
Street	164 BRIDGE ROAD	section A3
		You must provide an address in England or Wales for LLPs to be
Post town	SOUTHAMPTON	registered in England and Wales.
County/Region	HAMPSHIRE	You must provide an address in Wales, Scotland or Northern Ireland
Postcode	S O 3 1 7 E H	for LLPs to be registered in Wales, Scotland or Northern Ireland respectively
A5	Members' designation	
	Will all members from time to time be designated members ?	Members' designation If 'Yes' all members named will be designated If 'No' at least two members named must be designated

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Part 2 Proposed officers

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

There must be two designated members at all times. Unless there are at least two designated members all members will be designated

Member		
B1	Member appointments •	
Title*	Please use this section to list all the member appointments taken on formation For a corporate member complete C1-C5	Appointments For corporate member appointments please complete section C1-C5 instead of section B
Full forename(s)		● Former name(s)
Surname		Please provide any previous names which have been used for business
Former name(s) 2		purposes in the last 20 years. Married women do not need to give former names unless previously used for business purposes
Country/State of residence Output Description:		Country/State of residence This is in respect of your usual residential address as stated in
Date of birth	d	Section B4
Designated member •	Please tick this box if you are consenting to act as a designated member	◆ Designated member There must be at least two designated members at all times
		Additional appointments If you wish to appoint more members, please use the 'Member appointments' continuation page
B2	Member's service address [©]	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	Service address This is the address that will appear on the public record. This does not
Building name/number		have to be your usual residential address
Street		Please state 'The LLP's Registered Office' if your service address will
Post town		be recorded in the LLP's register of members' particulars as the LLP's
County/Region		registered office
Postcode		If you provide your residential address here it will appear on the
Country		public record
B3	Signature o	
_	I consent to act as member of the proposed LLP named in Section A1.	O Signature
Signature	Signature V	The person named above consents to act as member of the proposed LLP
	×	

Member

Full forename(s) Surname Former name(s) Country/State of residence Date of birth Designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member if you wish to appoint members at all Additional appointments' continuate Please complete the service address Please tick this box if you are consenting to act as a designated member Building name/number Street Please complete the service address Please tick this box if you are consenting to act as a designated member Designature Street Please tick this box if you are consenting to act as a designated member Designature Post town Country/Region Post town Country/Region Post town Country/Region Post town Country/Region I consent to act as member of the proposed LLP named in Section A1. Osignature The person named above to at as member of the proposed LLP named in Section A1.	B1	Member appointments 9	
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Surname Former name(s) Country/State of residence Date of birth Designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member Please tick this box if you are consenting to act as a designated member There must be at least two designated member Please complete the service address below You must also fill in the member's usual residential address in Section B4 Building name/number Street Post town Country/Region Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. OSignature The pesson named above to act as member of the proposed LLP named in Section A1. OSignature The pesson named above to act as member of the proposed LLP named in Section A1.			
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Designated member Please tick this box if you are consenting to act as a designated member There must be at least two designated member at all Additional appointment if you wish to appoint more members, please use the appointments' continuation on the public record. This is the address that we on the public record. This is the address that we on the public record. This have to be your usual residential address. Please complete the service address below You must also fill in the member's usual residential address in Section 84. Building name/number Street Post town County/Region Postcode Country B3 Signature O I consent to act as member of the proposed LLP named in Section A1. Section B4 O Designated member There must be at least two designated member in the member's population and population and population and population and the proposed LLP named in Section A1. O Signature The person named above to act as member of the ptroposed LLP named in Section A1. Designated member There must be at least two designated member in the member's population and populati	residence 🛭		● Country/State of residence This is in respect of your usual residential address as stated in
Please tick this box if you are consenting to act as a designated member the designated members at all Additional appointment fivor wish to appoint momembers, please use the appointments' continuate proposed usual residential address in Section B4 Building name/number Street Post town County/Region Postcode Country B3 Signature Please tick this box if you are consenting to act as a designated member and Additional appointment fivor wish to appoint momembers, please use the appointments' continuate on the public record This is the address that we on the public record This have to be your usual residence. Please state The LLP's Reconflicted in the LLP's recorded in the LLP's recorded office if you provide your residence address here it will appea public record I consent to act as member of the proposed LLP named in Section A1. Osignature The person named above to act as member of the proposed the proposed to act as member of the public record to act as member of the public record the public rec	Date of birth		
If you wish to appoint momembers, please use the appointments' continuate appointments' contin	Designated member 9	Please tick this box if you are consenting to act as a designated member	There must be at least two designated members at all times
Please complete the service address below You must also fill in the member's usual residential address in Section B4 Building name/number Street Post town County/Region Postcode Country B3 Signature I consent to act as member of the proposed LLP named in Section A1. Signature Signature Service address This is the address that wo on the public record This have to be your usual residences. Please state 'The LLP's Revolffice' if your service address. Please state 'The LLP's remembers' particulars as the registered office. If you provide your residence address here it will appear public record Signature O Signature The person named above to act as member of the place.			Additional appointments If you wish to appoint more members, please use the 'Member appointments' continuation page
Building name/number Street Post town County/Region Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. This is the address that wo on the public record This have to be your usual resi address. Please state 'The LLP's Report office' if your service add be recorded in the LLP's remembers' particulars as the registered office if you provide your resides address here it will appea public record Signature O Signature This is the address that wo on the public record This have to be your usual resi address. Please state 'The LLP's Report of the LLP's remembers' particulars as the registered office if you provide your resides address here it will appea public record O Signature The person named above to act as member of the public record the public record.	B2	Member's service address 9	
Street Post town County/Region Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. Signature			Service address This is the address that will appear on the public record. This does not
Please state 'The LLP's Regord Office' if your service addible recorded in the LLP's registered office County/Region Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. Signature The person named above to act as member of the proposed LLP named in Section A1. Signature Signature Signature Signature The person named above to act as member of the proposed LLP named in Section A1.			have to be your usual residential
Post town County/Region Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. Signature The person named above to act as member of the public record to act as member of the public record.	Jueet		Please state 'The LLP's Registered Office' if your service address will
Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. Signature The person named above to act as member of the public record Signature The person named above to act as member of the public record	Post town		members' particulars as the LLP's
Postcode Country Signature I consent to act as member of the proposed LLP named in Section A1. Signature The person named above to act as member of the public record	County/Region		If you provide your residential
Signature	Postcode		address here it will appear on the
I consent to act as member of the proposed LLP named in Section A1. Signature The person named above to act as member of the puller	Country		
Signature Signature Signature to act as member of the p	B3	Signature 6	
Signature Signature to act as member of the p		I consent to act as member of the proposed LLP named in Section A1.	
l LLP	Signature	Signature	to act as member of the proposed
×		×	LLP

C1	Corporate member appointments®	
	Please use this section to list all the corporate members of the LLP	• Registered or principal address
Name of corporate body or firm	Woodberry Secretarial Limited	This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number of
Building name/number	Winnington House	
Street	2 Woodberry Grove	LP (Legal post in Scotland) number
	North Finchiey	Designated member There must be at least two
Post town	London	designated members at all times
County/Region		Additional appointments If you wish to appoint more than one
Postcode	N 1 2 0 D R	corporate member, please use the 'Corporate member appointments' continuation page
Country		continuation page
Designated member 2	Please tick this box if you are consenting to act as a designated member [X]	
C2	Location of the registry of the corporate body or firm	
	Is the corporate director registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3	EEA companies 9	
	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/	England & Wales	www.companieshouse.gov.uk
firm is registered •		This is the register mentioned in Article 3 of the First Company Law
Registration number	7168188	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 9		
If applicable, the registration number		
C5	Signature o	
	I consent to act as member of the proposed LLP named in Section A1	♂ Signature The person named above consents
Signature	X B Kahan X	to act as corporate member of the proposed LLP

Corporate member

C1	Corporate member appointments®	-
	Please use this section to list all the corporate members of the LLP	• Registered or principal address
Name of corporate body or firm	Woodberry Directors Limited	This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be
Building name/number	Winnington House	a PO box number (unless contained within a full address), DX number or
Street	2 Woodberry Grove	LP (Legal post in Scotland) number
	North Finchley	O Designated member There must be at least two
Post town	London	designated members at all times
County/Region		Additional appointments If you wish to appoint more than one
Postcode	N 1 2 0 D R	corporate member, please use the 'Corporate member appointments'
Country		continuation page
Designated member 9	Please tick this box if you are consenting to act as a designated member	
C2	Location of the registry of the corporate body or firm	<u>, </u>
	Is the corporate director registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3	EEA companies ®	1
	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/	England & Wales	www.companieshouse.gov.uk
firm is registered •		This is the register mentioned in Article 3 of the First Company Law
Registration number	1671925	Directive (68/151/EEC)
C4	Non-EEA companies	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	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		
C5	Signature O	
_	I consent to act as member of the proposed LLP named in Section A1	♂ Signature The person named above consents
Signature	X B Kahan	to act as corporate member of the proposed LLP

Part 3	Signature
	I certify that I am a
	- Хайхихоххохужужужжжжжжжжжжжжжжжжжжжжжжжжжжж
	and that two or more persons named in this form are associated for carrying on lawful business with a view to profit
	I am signing this form on behalf of the LLP
Signature	Signature X B Kahan

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Presenter 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.

Contact name	Lauren Brandrick
Company name	A1 Company Services Limited
	(Our Ref LLP002541)
Address	Winnington House
	2 Woodberry Grove
	North Finchley
Post town	London
County/Region	
Postcode	N 1 2 0 D R
Country	
ΡΥ	57363 FINCHLEY
Telephone	020 8492 6363

Certificate

We will send your certificate to the presenters address (shown above) or if indicated to another address shown below

☐ At the registered office address (Given in Section A4)

✓ Checklist

We may return forms completed incorrectly or with information missing

Please make sure you have remembered the following

- You have checked that the proposed LLP name is available and the various rules that may affect your choice of name. More information can be found in guidance on our website.
- ☐ If the name of the company is the same as one already on the register as permitted by The Company and Business Names (Miscellaneous Provisions) Regulations 2008, please attach consent
- You have used the correct appointment section
 Any addresses given 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
- ☐ There are at least two designated members☐ The document has been signed, where indicated
- ☐ You have enclosed the correct fee
- ☐ All relevant attachments have been included

Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses

€ How to pay

A fee of £20 is payable to Companies House to incorporate an LLP

Make cheques or postal orders payable to 'Companies House'

Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below

For LLPs registered in England and Wales
The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ
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)

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 NR Belfast 1

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

Further information

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 alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk



FILE COPY

CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership No. OC355569

The Registrar of Companies for England and Wales hereby certifies that

SCOTT-OTWAY LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited and the situation of the registered office is in England/Wales.

Given at Companies House on 11th June 2010.



