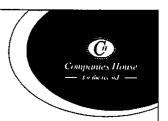
In accordance with Section 9 of the Limited Liability Partnerships Act 2000

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 Liabil Partnership (LLP)'



AZIO 19/01/2011

COMPANIES HOUSE

LLP details → Filling in this form LLP number 3 Please complete in typescript or in LLP name in full bold black capitals COMMONWEALTH CAPITAL MANAGEMENT LLP All fields are mandatory unless specified or indicated by * Date of member's appointment ₫2 143 ^y 0 Date of appointment ۷0 New member's details • Former name(s) Title * Please provide any previous names Full forename(s) **MARTIN** which have been used for business purposes in the past 20 years Married women do not need to give former names unless previously used Surname **MATHER** for business purposes Former name(s) • Continue in Section 6 if required Country/State of Country/State of residence UNITED KINGDOM residence @ This is in respect of your usual Date of birth ₫5 "ნ residential address as stated in 0 ^y9 ۷8 ^уЗ Section 4a Appointment type 9 Are you being appointed as a designated member? Appointment type Your designation must match the status of the LLP ✓ No New member's service address © O Service address Please complete the service address below You must also complete This is the address that will appear the member's usual residential address in Section 4a on the public record. This does not THE LLP'S REGISTERED OFFICE Building name/number have to be your usual residential Street 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 County/Region If you provide your residential Postcode address here it will appear on the public record Country

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	Signature X JUP Wath	•
Authorising signature	Signature X EAM Alands. X	
	This form may 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

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)

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 Address	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 town	For LLPs registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ	
	DX 33050 Cardiff	
Country DX	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)	
Telephone	For LLPs registered in	
We may return forms completed incorrectly or with information missing	Northern Ireland The Registrar of Companies, Companies House, 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 Further information	
 □ 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 □ You have included all former names used for 	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	alternative format. Please visit the	
completing this form 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	