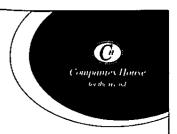
In accordance with Section 9 of the Limited Liability Partnerships Act 2000

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

You cannot use the form to appoint a corporate membe do this, please use form LL, 'Appointment of a corporate member of a Limited Liabilit Partnership (LLP)'



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1	LP details		
	Lr uetaiis		
LLP number	O C 3 5 8 5 0 1	→ Filling in this form Please complete in typescript or in bold black capitals	
LLP name in full	THE BEAUTY LOUNGE SHREWSBURY LLP		
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
3	New member's details		
Title *	MISS	Please provide any previous names which have been used for business purposes in the past 20 years Married women do not need to give former names unless previously used for business purposes	
Full forename(s)	RACHAEL		
	EL12ABETH		
Surname	CHRISTMAS		
Former name(s) •		Continue in Section 6 if required Country/State of residence This is in respect of your usual	
Country/State of residence •	UK		
Date of birth	27 68 188	residential address as stated in Section 4a Appointment type Your designation must match the status of the LLP	
Appointment type	Are you being appointed as a designated member?		
	✓ Yes		
	□ 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	This is the address This is the address that will appear on the public record This does not have to be your usual residential address. Please state 'The LLP's Registered Office' if your service address is recorded in the LLP's register of members as the LLP's registered office If you provide your residential address here it will appear on the public record	
Building name/number	The LLP's Registered Office UNIT C		
Street	KNIGHITS COURT		
	BATTLEFIELD ENTERPRISE PARK		
Post town	SHREWSBURY		
County/Region	SHROPSHIRE		
Postcode	SYI 3 GA		
Country	UK		

LL APO1
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	X Prison	
Authorising signature	Signature X Linchidnas. X	
	This form may be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names ①		Additional former names Use this space to enter any additional names

LL AP01

Appointment of member 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 RACHAEL CHRISMAS
COMPANY NAME THE BEAUTY LOUNCE
SHREWSBURY
UNDERDALE HALL
TELFORD WAY
Post town SHEEUSBURY
County/Region SHROPSHIRE
Postcode 5 7 Q 5 X Q
Country UK
DX
Telephone 07816962846
C Charleton

✓ Checklist

We may return forms completed incorrectly or with information missing.

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
- $\hfill \square$ You have completed the date of appointment
- You have completed the appointment type
- ☐ You have indicated if you are a designated member
- ☐ You have provided both the service address and the usual residential address
- ☐ 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 business purposes over the last 20 years
- You have enclosed a relevant Section 243
 application if applying for this at the same time as completing this form
- ☐ The new member has signed the form
- An authorising signature has been given by a designated member

Important information

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

✓ 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 3B5 DX 481 N R 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