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 fo You cannot use the form to appoint a corporate membi do this, please use form LL. 'Appointment of a corporat member of a Limited Liabili Partnership (LLP)'



A50 26/07/2011 COMPANIES HOUSE

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1	LLP details		
LLP number	O C 3 5 9 1 0 3	Please complete in typescript or in bold black capitals All fields are mandatory unless specified or indicated by *	
LLP name in full	The Boston Consulting Group UK LLP		
2	Date of member's appointment		
Date of appointment	$\begin{bmatrix} d & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \\ 0 & 0 &$		
3	New member's details		
Title *		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)	Maurice		
Surname	Berns		
Former name(s) •		Continue in Section 6 if required	
Country/State of residence •	O Country/State of resider		
Date of birth	d2 d1 m0 m3 y1 y9 y7 y1	residential address as stated in Section 4a	
Appointment type	Are you being appointed as a designated member? Yes No	Appointment type Your designation must match the status of the LLP	
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	Service address This is the address that will appear on the public record This does not	
Building name/number	20	have to be your usual residential	
Street	Manchester Square	address Please state 'The LLP's Registered	
		Office' if your service address is recorded in the LLP's register of	
Post town	London	members as the LLP's registered	
County/Region	 	If you provide your residential	
Postcode	W 1 U 3 P Z	address here it will appear on the public record	
Country	United Kingdom	·	

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