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 member do this, please use form LL Af 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



A13 15/04/2011 COMPANIES HO

94

	Partnership (LLP)	COMPANIES HOUSE	
1	LLP details		
LLP number	O C 3 6 2 7 4 6	Filling in this form Please complete in typescript or in	
LLP name in full	COBALT DATA CENTRE 3 LLP	bold black capitals.	
-		All fields are mandatory unless specified or indicated by *	
2 🖋	Date of member's appointment		
Date of appointment	10 3 2 2 7 10 11 11 11 11 11 11 11 11 11 11 11 11		
3	New member's details		
Title *	Me	• Former name(s)	
Full forename(s)	SHELDON	 Please provide any previous names which have been used for business 	
		purposes in the past 20 years. Married women do not need to give	
Surname	FAGELMAN	former names unless previously used for business purposes Continue in Section 6 if required	
Former name(s) •			
Country/State of residence 2	uk -	© Country/State of residence	
Date of birth	60 47 MINO 1. 4 16 1	This is in respect of your usual residential address as stated in Section 4a	
Appointment type 9	Are you being appointed as a designated member? • Appointment type		
	Yes	Your designation must match the status of the LLP	
	No		
-	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	THE LLP'S REGISTERED OFFICE + 1271 have to be your usual reside		
Street	RECEIVY - STREET	address. Please state 'The LLP's Registered	
-		Office' if your service address is recorded in the LLP's register of	
Post town	EGNOON	members as the LLP's registered	
County/Region -		office If you provide your residential	
Postcode	address here it will appear on public record		
Country			
-	· · · · · · · · · · · · · · · · · · ·		

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	Signăture X	· _ X	
Authorising signature	This form may be signed and authorised by Designa	ated member, Judicial-factor	
6	Additional former names (continued from Se		
			Additional former names
Former names •			Use this space to enter
-		.	any additional names
		•	
	-		-
	-	<u>.</u>	
	, , , , , , , , , , , , , , , , , , ,		
_		<u> </u>	•
		₹ 4	
	_		
-	-		
	- -	- *	=
_	<u> </u>		
-	 . * <u>.</u> -		
-		•	
=	<u>-</u>		
	• •		
-			
	• • • • • • • • • • • • • • • • • • •		
	-		
		-	
	-	- -	
			
- *		•	
-			
		· ·	
	-	•	

LL AP01

Presenter information

, Appointment of member of a Limited Liability Partnership (LLP)

you do it will h on the form Th	ve to give any contact information, but if help Companies House if there is a query ne contact information you give will be thers of the public record		
Contact name IAN	SAUNDERS		
Company name AR	TAIUS LIMITED		
,			
Address 233-237	OLD MARYLEBONE ROAD		
Post town LOND	ON		
County/Region			
Postcode	N W 1 5 Q T		
Country UK	<u>, , , , , , , , , , , , , , , , , , , </u>		
DX			
Telephone 020 76	616 8800		
✓ Checklis			
with informa	rn forms completed incorrectly or tion missing		
following	sure you have remembered the		
☐ The LLP na	me and number match the information		
	e public Register		
☐ You have provided a correct date of birth☐ You have completed the date of appointment			
	completed the appointment type		
	ndicated if you are a designated member		
	provided both the service address and the		
1 0500,70510	ential address must be a physical location. They cannot		
	ox number (unless part of a full service		
	X or LP (Legal Post in Scotland) number		
🔲 You have II	ncluded all former names used for		
	business purposes over the last 20 years		
	enclosed a relevant Section 243		
application completing	if applying for this at the same time as		
, composition	4 1113 101111		

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, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG 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

The new member has signed the formAn authorising signature has been given by a

designated member