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

LL AP01

BLUEPRINT

2000

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 To
do this, please use form LL APO2
'Appointment of a corporate
member of a Limited Liability
Partnership (LLP)'



L75181UA* LD5 28/04/2011 COMPANIES HOUSE "AN8AZTBI"

A13 15/04/2011

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	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	0 3 0 4 2011.	
3	New member's details	
Title *	MK	• Former name(s) Please provide any previous names
Full forename(s)	GRIC	which have been used for business purposes in the past 20 years.
Surname	FGLLNER	Married women do not need to give former names unless previously used for business purposes
Former name(s) •		Continue in Section 6 if required
Country/State of residence •	uK	Country/State of residence This is in respect of your usual
Date of birth	100 10 114 15 19	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	
4	New member's service address O	-
	Please complete the service address below You must also complete the member's usual residential address in Section 4a	O Service address This is the address that will appear on the public record. This does not
Building name/numbe	27-THE LLP'S REGISTERED OFFICE	have to be your usual residential address
Street	REGENT STREET	Please state 'The LLP's Registered
		Office' if your service address is recorded in the LLP's register of
Post town	LOWON	members as the LLP's registered office
County/Region		If you provide your residential
Postcode	W118 265	address here it will appear on the
Country		poolic record

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

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Presenter information	
You do not have to give any contact information you do it will help Companies House if there is on the form. The contact information you give visible to searchers of the public record.	s a query
Contact name IAN SAUNDERS	
Company name ARTAIUS LIMITED	
Address 233-237 OLD MARYLEBONE ROA	/D
Post town LONDON	
County/Region	
Postcode	Т
Country UK	
DX	
Telephone 020 7616 8800	
✓ Checklist	
We may return forms completed incorrect with information missing	tly or
Please make sure you have remembered to following The LLP name and number match the info held on the public Register You have provided a correct date of birth You have completed the date of appointmed type you have indicated if you are a designated You have provided both the service address usual residential address Addresses must be a physical location. The	rmation eent e d member ss and the

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

be a PO Box number (unless part of a full service

You have included all former names used for business purposes over the last 20 years

☐ You have enclosed a relevant Section 243

☐ The new member has signed the form☐ An authorising signature has been given by a

completing this form

designated member

address), DX or LP (Legal Post in Scotland) number

application if applying for this at the same time as