



**Appointment of Member of a  
Limited Liability Partnership (LLP)**

LLP name in full: **CS CAPITAL PARTNERS IV (FP) LLP**

LLP Number: **OC369417**



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## **New Appointment Details**

Date of Appointment: **30/01/2024**

Name: **MS CAROL ANN MEADE VAN DEVENTER**

The Limited Liability Partnership (LLP) confirms that the person named has consented to act as a non-designated member.

Service Address: **C/O THE JOHN VAN DEVENTER REVOCABLE TRUST  
PO Box 67962  
1 SPEEDWELL AVENUE  
MORRISTOWN  
NJ  
UNITED STATES  
67962**

Country/State Usually Resident: **UNITED STATES**

Date of Birth: **\*\*/03/1988**

## **Authorisation**

**Authenticated**

**This form was authorised by one of the following:**

**Designated member, Judicial Factor.**