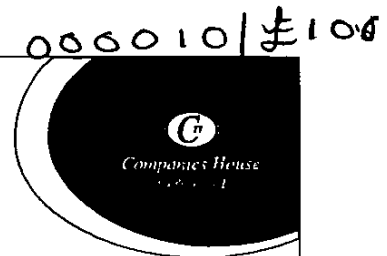


In accordance with Section 2 of the Limited Liability Partnership Act 2000 and the relevant provisions of the Companies Act 2006 as applied to Limited Liability Partnerships.

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)



A fee is payable with this form
Please see 'How to pay' on the last page.

☒ **What this form is for**
You may use this form to incorporate a Limited Liability Partnership

☐ **What this form is NOT for**
You cannot use this form to incorporate a company. To do this please use form IN01 'Application to register a company'

TUESDAY



A28 08/11/2011
COMPANIES HOUSE

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Part 1 LLP details

→ **Filling in this form**
Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by *

A1 LLP details

Please show the proposed LLP name below.

LLP name in full ¹ **ALSICAL CIS**

Name ending ² **LLP/Limited Liability Partnership**

For official use

L L P

¹ **Duplicate names**
Duplicate names are not permitted

² **Name ending**
You must delete either LLP or Limited Liability Partnership.
If the LLP is situated in Wales and you chose to have a Welsh ending (PAC or Partneriaeth Atebolrwydd Cyfyngedig), please use form LL IN01c

A2 LLP name restrictions ³

Please tick the box only if the proposed LLP name contains sensitive or restricted words or expressions that require you to seek comments of a government department or other specified body

☐ I confirm that the proposed company name contains sensitive or restricted words or expressions and that approval, where appropriate, has been sought of a government department or other specified body and I attach a copy of their response

³ **LLP name restrictions**
A list of sensitive or restricted words or expressions that require consent can be found in guidance available on our website
www.companieshouse.gov.uk

A3 Situation of registered office ⁴

Please tick the appropriate box below that describes the situation of the proposed registered office (only one box must be ticked)

- ☒ England and Wales
☐ Wales
☐ Scotland
☐ Northern Ireland

⁴ **Registered office**
Every LLP must have a registered office and this is the address to which the Registrar will send correspondence.
For England and Wales LLPs, the address must be in England or Wales.
For Welsh, Scottish or Northern Ireland LLPs, the address must be in Wales, Scotland or Northern Ireland respectively.

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LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

A4 Registered office address ①

| | | | | | | | |
|----------------------|---|---|---|---|---|---|---|
| | Please give the registered office address of your LLP | | | | | | |
| Building name/number | OFFICE 305, PARKWAY HOUSE | | | | | | |
| Street | SHEEN LANE | | | | | | |
| | | | | | | | |
| Post town | LONDON | | | | | | |
| County/Region | | | | | | | |
| Postcode | S | W | 1 | 4 | 8 | L | S |

① Registered office address

You must ensure that the address shown in this section is consistent with the situation indicated in section A3

You must provide an address in England or Wales for LLPs to be registered in England and Wales

You must provide an address in Wales, Scotland or Northern Ireland for LLPs to be registered in Wales, Scotland or Northern Ireland respectively

A5 Members' designation

Will all members from time to time be designated members? ②

- ☐ Yes
☒ No

② Members' designation

If 'Yes' all members named will be designated. If 'No' at least two members named must be designated

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Part 2 Proposed officers

- For a **member** who is an individual, go to **Section B1**
 → For a **corporate member**, go to **Section C1**

There must be two designated members at all times. Unless there are at least two designated members all members will be designated.

Member**B1****Member appointments ①**

Please use this section to list all the member appointments taken on formation
 For a corporate member complete C1-C5

| | |
|------------------------------|---|
| Title* | |
| Full forename(s) | |
| Surname | |
| Former name(s) ② | |
| Country/State of residence ③ | |
| Date of birth | d d m m y y y y |
| Designated member ④ | Please tick this box if you are consenting to act as a designated member <input type="checkbox"/> |

① Appointments

For corporate member appointments, please complete section C1-C5 instead of section B

② Former name(s)

Please provide any previous names which have been used for business purposes in the last 20 years
 Married women do not need to give former names unless previously used for business purposes

③ Country/State of residence

This is in respect of your usual residential address as stated in Section B4

④ Designated member

There must be at least two designated members at all times.

Additional appointments

If you wish to appoint more members, please use the 'Member appointments' continuation page

B2**Member's service address ⑤**

Please complete the service address below. You must also fill in the member's usual residential address in **Section B4**.

| | |
|----------------------|--|
| Building name/number | |
| Street | |
| Post town | |
| County/Region | |
| Postcode | |
| Country | |

⑤ Service 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 will be recorded in the LLP's register of members' particulars as the LLP's registered office

If you provide your residential address here it will appear on the public record

B3**Signature ⑥**

I consent to act as member of the proposed LLP named in **Section A1**

| | |
|-----------|---|
| Signature | Signature   |
|-----------|---|

⑥ Signature

The person named above consents to act as member of the proposed LLP

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Member

| B1 Member appointments ① | |
|--|---|
| Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5. | |
| Title* | |
| Full forename(s) | |
| Surname | |
| Former name(s) ② | |
| Country/State of residence ③ | |
| Date of birth | d d m m y y y y |
| Designated member ④ | Please tick this box if you are consenting to act as a designated member <input type="checkbox"/> |
| ① Appointments For corporate member appointments please complete section C1-C5 instead of Section B. | |
| ② Former name(s) Please provide any previous names which have been used for business purposes in the last 20 years Married women do not need to give former names unless previously used for business purposes. | |
| ③ Country/State of residence This is in respect of your usual residential address as stated in section B4 | |
| ④ Designated member There must be at least two designated members at all times. Additional appointments If you wish to appoint more members, please use the 'Member appointments' continuation page | |

| B2 Member's service address ⑤ | |
|--|---|
| Please complete the service address below. You must also fill in the member's usual residential address in Section B4 | |
| Building name/number | |
| Street | |
| Post town | |
| County/Region | |
| Postcode | |
| Country | . |
| ⑤ Service 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 will be recorded in the LLP's register of members' particulars as the LLP's registered office. If you provide your residential address here it will appear on the public record | |

| B3 Signature ⑥ | |
|--|------------------|
| I consent to act as member of the proposed LLP named in Section A1 | |
| Signature | Signature X X |
| ⑥ Signature The person named above consents to act as member of the proposed LLP | |

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Corporate member

| | | | |
|---|--|--|---|
| C1 | Corporate member appointments | | |
| | Please use this section to list all the corporate members of the LLP | | |
| Name of corporate body or firm | ALSICAL INCORPORATION | | Registered or principal address This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number. Designated member There must be at least two designated members at all times. Additional appointments If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page. |
| Building name/number | 3A LITTLE DENMARK COMPLEX, 147 | | |
| Street | MAIN STREET | | |
| Post town | ROAD TOWN | | |
| County/Region | TORTOLA | | |
| Postcode | V G 1 1 1 0 | | |
| Country | BRITISH VIRGIN ISLANDS | | |
| Designated member | Please tick this box if you are consenting to act as a designated member <input checked="" type="checkbox"/> | | |
| C2 | Location of the registry of the corporate body or firm | | |
| | Is the corporate member registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only | | |
| C3 | EEA companies | | |
| | Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register | | EEA A full list of countries of the EEA can be found in our guidance www.companieshouse.gov.uk This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC) |
| Where the company/firm is registered | | | |
| Registration number | | | |
| C4 | Non-EEA companies | | |
| | Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register | | Non-EEA Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register. |
| Legal form of the corporate body or firm | LIMITED | | |
| Governing law | BRITISH VIRGIN ISLANDS | | |
| If applicable, where the company/firm is registered | THE REGISTRAR OF CORPORATE AFFAIRS | | |
| If applicable, the registration number | 1678583 | | |
| C5 | Signature | | |
| | I consent to act as member of the proposed LLP named in Section A1 | | Signature The person named above consents to act as corporate member of the proposed LLP. |
| Signature | Signature X Ms Agnes Jouaneau X | | |

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LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Corporate member

| | | | |
|---|--|--|--|
| C1 | Corporate member appointments | | |
| | Please use this section to list all the corporate members of the LLP | | |
| Name of corporate body or firm | STEEL REFRACTORY LIMITED | | Registered or principal address This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number. |
| Building name/number | 1504 B, 363 | | |
| Street | QUEEN STREET | | |
| Post town | AUCKLAND | | |
| County/Region | | | |
| Postcode | | | |
| Country | NEW ZEALAND | | |
| Designated member | Please tick this box if you are consenting to act as a designated member <input checked="" type="checkbox"/> | | Designated member There must be at least two designated members at all times. Additional appointments If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page. |
| C2 | Location of the registry of the corporate body or firm | | |
| | Is the corporate member registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only | | |
| C3 | EEA companies | | |
| | Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register | | EEA A full list of countries of the EEA can be found in our guidance www.companieshouse.gov.uk This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC) |
| Where the company/firm is registered | | | |
| Registration number | | | |
| C4 | Non-EEA companies | | |
| | Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register | | Non-EEA Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register. |
| Legal form of the corporate body or firm | LIMITED | | |
| Governing law | NEW ZEALAND | | |
| If applicable, where the company/firm is registered | NZ COMPANIES OFFICE IN AUCKLAND | | |
| If applicable, the registration number | 2473568 | | |
| C5 | Signature | | |
| | I consent to act as member of the proposed LLP named in Section A1. | | Signature The person named above consents to act as corporate member of the proposed LLP. |
| Signature | Signature <i>Angelique Elizabeth Lilley</i> X | | |

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LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Part 3

Signature

I certify that I am a

- Solicitor engaged in the formation of this LLP
- Member named of this LLP

and that two or more persons named in this form are associated for carrying on lawful business with a view to profit

I am signing this form on behalf of the LLP

Signature

Signature

X Agnes Louaneau X

LL IN01

Application for the incorporation 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

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone 07405099389



Certificate

We will send your certificate to the presenter's address (shown above) or if indicated to another address shown below.

☒ At the registered office address (Given in Section A4)



Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following

- ☒ You have checked that the proposed LLP name is available and the various rules that may affect your choice of name. More information can be found in guidance on our website.
- ☐ If the name of the company is the same as one already on the register as permitted by The Company and Business Names (Miscellaneous Provisions) Regulations 2008, please attach consent.
- ☒ You have used the correct appointment section.
- ☒ Any addresses given 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.
- ☒ There are at least two designated members.
- ☒ The document has been signed, where indicated.
- ☒ You have enclosed the correct fee.
- ☐ All relevant attachments have been included.



Important information

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



How to pay

A fee is payable on this form.

Make cheques or postal orders payable to 'Companies House'. For information on fees, go to www.companieshouse.gov.uk



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



FILE COPY

**CERTIFICATE OF INCORPORATION
OF A
LIMITED LIABILITY PARTNERSHIP**

Partnership No. OC369592

The Registrar of Companies for England and Wales hereby certifies that

ALSICAL CIS LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership and that the partnership is limited and the situation of the registered office is in England/Wales.

Given at Companies House on 8th November 2011.



Companies House
— for the record —



THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES