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

LL INU | 66279181/(A)
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

X What this form is NOT for You cannot use this form to incorporate a company To do please use form IN01 'Applic register a company



28/02/2012 **COMPANIES HOUSE**

→ Filling in this form Please complete in typescript or in

		Dold Diack Capitals.
		All fields are mandatory unless specified or indicated by *
A1	LLP details	
	Please show the proposed LLP name below	O Duplicate names Duplicate names are not permitted
LLP name in full •	SEATING ERGONOMICS ASSISTIVE	Name ending You must delete either LLP or Limited
	TECHNOLOGIES	Liability Partnership If the LLP is situated in Wales and you
Name ending 2	LLP/ Limited Liability Partnership	chose to have a Welsh ending (PAC or
For official use		Partneriaeth Atebolrwydd Cyfyngedig), please use form LL INO1c.
A2	LLP name restrictions o	
	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	● LLP name restrictions A list of sensitive or restricted words or expressions that require consent can be found in guidance available on our website
	☐ 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	www.companieshouse.gov.uk
A3	Situation of registered office o	
	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	Registered office Every LLP must have a registered office and this is the address to which the Registrar will send correspondence
	Scotland Northern Ireland	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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Application for the incorporation of a Limited Liability Partnership (LLP)

A4	Registered office address •		
	Please give the registered office address of your LLP	Registered office address You must ensure that the address	
Building name/number	KEMP HOUSE	shown in this section is consistent with the situation indicated in	
Street	152 CITY ROAD	section A3	
		You must provide an address in England or Wales for LLPs to be	
Post town	LONDON	registered in England and Wales.	
County/Region		You must provide an address in Wales, Scotland or Northern Ireland	
Postcode	ECIVIZNX	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? ✓ Yes ✓ No	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 o	.
	Please use this section to list all the member appointments taken on formation For a corporate member complete C1-C5	● Appointments For corporate member appointments, please complete section C1-C5
Title*	MR	instead of section B Former name(s)
Full forename(s)	TAMES ANTHONY NELSON	Please provide any previous names
Surname	NELSON	which have been used for business purposes in the last 20 years.
Former name(s) •		Married women do not need to give former names unless previously used for business purposes.
Country/State of residence •	UNITED KINGDOM	Country/State of residence This is in respect of your usual residential address as stated in
Date of birth	08 06 1972	Section B4
Designated member	Please tick this box if you are consenting to act as a designated member	© 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 [©]	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	Service address This is the address that will appear on the public record This does not
Building name/number	THE LLP'S REGISTERED OFFICE	have to be your usual residential address.
Street		Please state 'The LLP's Registered
		Office' if your service address will be recorded in the LLP's register of
Post town		members' particulars as the LLP's registered office
County/Region		If you provide your residential
Postcode		address here it will appear on the
Country		punic record
В3	Cianatura A	
12	Signature o	05
	I consent to act as member of the proposed LLP named in Section A1.	OSignature The person named above consents
Signature	X James Nelson X	to act as member of the proposed LLP

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

Member

	Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5.	• Appointments For corporate member appointment please complete section C1-C5
Title*	MR	instead of Section B
Full forename(s)	GLYN RICHARD	Please provide any previous names
Surname	MATTHEWS	which have been used for business purposes in the last 20 years.
Former name(s) 2		Married women do not need to give former names unless previously use for business purposes
Country/State of residence •	UNITED KINGDOM	O Country/State of residence This is in respect of your usual residential address as stated in
Date of birth	12 10 11 1/19/6/6	section B4
Designated member •	Please trck this box if you are consenting to act as a designated member	O 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 ⁹	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	Service address This is the address that will appear
Building name/number Street	THE LLP'S REGISTERED OFFICE	on the public record This does not have to be your usual residential address
30001		Please state 'The LLP's Registered Office' if your service address will
Post town		be recorded in the LLP's register of members' particulars as the LLP's registered office
County/Region	\ 	If you provide your residential
Postcode		address here it will appear on the public record
Country		<u> </u>
B3	Signature 6	
	I consent to act as member of the proposed LLP named in Section A1	OSignature The person named above consents
Signature	Signature	to act as member of the proposed
	×	LLP

LL IN01 - continuation page
Application for the incorporation of a Limited Liability Partnership (LLP)

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.

Member

B1	Member appointments		
	Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5	Appointments For corporate member appointments, please complete section C1-C5	
Title*	MR	instead of Section B.	
Full forename(s)	PHILIP JAMES	Please provide any previous names	
Surname	BURGIN	which have been used for business purposes in the last 20 years.	
Former name(s) ●		Married women do not need to give former names unless previously used for business purposes	
Country/State of residence •	UNITED KINGDOM	Ocuntry/State of residence This is in respect of your usual residential address as stated in	
Date of birth	3 1 70 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	section B4	
Designated member •	Please tick this box if you are consenting to act as a designated member	Designated Member There must be at least two designated members at all times.	
B2	Member's service address 9		
_	Please complete the service address below. You must also fill in the member's	Service address	
	usual residential address in Section B4.	This is the address that will appear	
Building name/number	THE LLP'S REGISTERED OFFICE	on the public record This does not have to be your usual residential address	
Street		Please state 'The LLP's Registered	
D-44		Office' if your service address will be recorded in the LLP's register of	
Post town		members' particulars as the LLP's registered office.	
County/Region	 	If you provide your residential	
Postcode		address here it will appear on the public record	
Country			
B3	Signature 💇		
	I consent to act as member of the proposed LLP named in Section A1.	Signature The person named above consents	
Signature	Separture X Phini T BLO.	to act as member of the proposed	

LL IN01 - continuation page
Application for the incorporation of a Limited Liability Partnership (LLP)

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.

Member

B1	Member appointments	
	Please use this section to list all the member appointments taken on formation For a corporate member, complete Section C1-C5.	Appointments For corporate member appointments, please complete section C1-C5
Title*	MR	instead of Section B.
Full forename(s)	SAM SUTTON	Please provide any previous names
Surname	RAWLINSON	which have been used for business purposes in the last 20 years.
Former name(s)❷		Married women do not need to give former names unless previously used for business purposes.
Country/State of residence •	UNITED KINGDOM	Country/State of residence This is in respect of your usual residential address as stated in
Date of birth	28 66 1987	section B4
Designated member �	Please tick this box if you are consenting to act as a designated member	Designated Member There must be at least two designated members at all times.
B2	Member's service address Output Description:	
	Please complete the service address below You must also fill in the member's usual residential address in Section B4	Service address This is the address that will appear
Building name/number Street	THE UP'S REGISTERED OFFICE	on the public record. This does not have to be your usual residential address.
Sueet		Please state 'The LLP's Registered Office' if your service address will
Post town		be recorded in the LLP's register of members' particulars as the LLP's registered office
County/Region		If you provide your residential
Postcode		address here it will appear on the public record
Country		pasie record
В3	Signature [©]	
	I consent to act as member of the proposed LLP named in Section A1.	© Signature
Signature	Signature X	The person named above consents to act as member of the proposed LLP
	1	•

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	• Registered or principal address This is the address that will appear	
Name of corporate body or firm		on the public record This address must be a physical location for the delivery of documents. It cannot be	
Building name/number		a PO box number (unless contained within a full address), DX number or	
Street		LP (Legal post in Scotland) number Designated member	
Post town		There must be at least two designated members at all times.	
		Additional appointments	
County/Region	<u> </u>	If you wish to appoint more than one corporate member, please use the	
Postcode		'Corporate member appointments' continuation page	
Country			
Designated member	Please tick this box if you are consenting to act as a designated member		
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	SEEA A full list of countries of the EEA can be found in our guidance	
Where the company/ firm is registered •		www.companieshouse.gov.uk	
Registration number		This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC)	
	Non-PPA companies	Directive (OW151/2007)	
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,	
Legal form of the corporate body or firm		you must also provide its number in that register	
Governing law			
If applicable, where the company/firm is registered 9			
If applicable, the registration number			
C5	Signature o	<u> </u>	
	I consent to act as member of the proposed LLP named in Section A1	O Signature	
Signature	Signature X	The person named above consents to act as corporate member of the proposed LLP	
	^		

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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	Registered or principal address This is the address that will appear
Name of corporate body or firm		on the public record This address must be a physical location for the delivery of documents. It cannot be
Building name/number		a PO box number (unless contained within a full address), DX number or
Street		LP (Legal post in Scotland) number Designated member
Post town		There must be at least two designated members at all times.
		Additional appointments
County/Region	 	If you wish to appoint more than one corporate member, please use the
Postcode		'Corporate member appointments' continuation page.
Country		
Designated member [©]	Please tick this box if you are consenting to act as a designated member	
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 •	· <u>·</u>
	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
Where the company/ firm is registered •		www companieshouse gov uk This is the register mentioned in
Registration number		Article 3 of the First Company Law Directive (68/151/EEC)
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,
Legal form of the corporate body or firm		you must also provide its number in that register
Governing law		
If applicable, where the company/firm is registered •		
If applicable, the registration number		
C5	Signature o	
	I consent to act as member of the proposed LLP named in Section A1.	O Signature The person named above consents
Signature	Signature X	to act as corporate member of the proposed LLP
	^	

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 clawful business with a view to profit	on
	I am signing this form on behalf of the LLP	
Signature	X James Welhon	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 Country DX 545 Certificate We will send your certificate to the presenters 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

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

All relevant attachments have been included

quidance on our website

consent

Scotland) number

 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

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

☐ There are at least two designated members.☐ The document has been signed, where indicated

You have enclosed the correct fee



FILE COPY

CERTIFICATE OF INCORPORATION OF A LIMITED LIABILITY PARTNERSHIP

Partnership No. OC373006

The Registrar of Companies for England and Wales hereby certifies that

SEATING ERGONOMICS ASSISTIVE TECHNOLOGIES LIMITED LIABILITY PARTNERSHIP

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 1st March 2012.



