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 an corporate member To do this, use form LL AP02 'Appointme a corporate member of a Limi Liability Partnership (LLP)'



A10 08/08/2012 COMPANIES HOUSE

#366

1	LLP details		
LLP number .	O C 3 7 6 5 3 6	→ Filling in this form Please complete in typescript or in	
LLP name in full	Elysian Fuels 17 LLP	bold black capitals	
		All fields are mandatory unless specified or indicated by *	
2	Date of member's appointment		
Date of appointment	$\begin{bmatrix} d & 0 & 0 & 0 & 0 & 0 \end{bmatrix}$		
3	New member's details		
Title *		Please provide any previous names	
Full forename(s)	Lorraine	which have been used for business	
		purposes in the past 20 years Marned women do not need to give	
Surname	Cousins	former names unless previously used	
Former name(s) •		Continue in Section 6 if required	
Country/State of residence @	United Kingdom	② Country/State of residence This is in respect of your usual	
Date of birth	$\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d & d & d & d \\ d & d & d &$	residential address as stated in Section 4a	
Appointment type 9	Are you being appointed as a designated member?		
	Yes	Your designation must match the status of the LLP	
	☑ No		
4	New member's service address •		
	Please complete the service address below You must also complete the member's usual residential address in Section 4a	This is the address that will appear on the public record. This does not have	
Building name/number	19	to be your usual residential address	
Street	Thorpe Meadows	Please state 'The LLP's Registered Office' if your service address is	
		recorded in the LLP's register of	
Post town	Peterborough	members as the LLP's registered office If you provide your residential address	
County/Region	Cambridgeshire		
Postcode	P E 3 6 G A	here it will appear on the public record	
Country	United Kingdom		

LL AP01

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	Signature X Duen of Attornax	
Authorising signature	Signature X	
	This form must be signed and authorised by Designated member, Judicial factor	
6	Additional former names (continued from Section 3)	
Former names •		Additional former names Use this space to enter any additional names
		7

LL AP01

Appointment of member 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	Company Secretariat		
	Department		
Address	Future Capital Partners Limited		
	10 Old Burlington Street		
Post town	London		
County/Region			
Postcode	W 1 S 3 A G		
Country	United Kingdom		
ĐΧ			
Telephone			

Checklist

We may return forms completed incorrectly or with information missing

Please make sure you have remembered the following.

- ☐ The LLP name and number match the information held on the public Register
- ☐ You have provided a correct date of birth
- You have completed the date of appointment
- You have completed the appointment type
- ☐ You have indicated if you are a designated member.
- ☐ You have provided both the service address and the usual residential address
- ☐ Addresses 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
- You have included all former names used for business purposes over the last 20 years
- ☐ You have enclosed a relevant Section 243 application if applying for this at the same time as completing this
- ☐ The new member has signed the form
- An authorising signature has been given by a designated member

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 enquines@companieshouse gov uk

This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk