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

LL AP01

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



A27 14/06/2014

#326

	Partnership (LLP)	COMPANIES HOUSE
1	LLP details	
LLP number	0 C 3 9 2 9 6 3	Filling in this form Please complete in typescript or in
LLP name in full	LIGHTSTONE TRING LLP bold black capitals	
		All fields are mandatory unless specified or indicated by *
2	Date of member's appointment	
Date of appointment	d / da mo mg y2 y0 y1 y4	
3	New member's details	
Title *	MR	Former name(s) Please provide any previous names
Full forename(s)	SIMON FRANCIS	which have been used for business purposes in the past 20 years
Surname	ROGERS	Marned 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 3	ENGLAND	Country/State of residence This is in respect of your usual residential address as stated in
Date of birth	d ₂ d ₇ m ₁ m ₀ y ₁ y ₉ y ₅ y ₆	Section 4a
Appointment type 3	Are you being appointed as a designated member?	Appointment type Your designation must match the
	[x] Yes	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	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 is recorded in the LLP's register of
Post town		members as the LLP's registered office
County/Region		If you provide your residential address here it will appear on the
Postcode		public record
Country		

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5	Signatures	
	I consent to act as member of the above named LLP	
New member's signature	Signature X	
Authorising signature	X This form must be signed and authorised by a designated member, Judicial factor	
6	Additional former names (continued from Section 3)	<u> </u>
Former names •		Additional former names Use this space to enter any additional names

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Presenter information	I Important 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.	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.	
Contact name Gordon Oliver	₩ Where to send	
Company name Hamlins LLP	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below.	
Post town County/Region Postcode County DX 53803 Oxford Circus North Telephone 0207 355 6000 Checklist We may return forms completed incorrectly or with information missing. Please make sure you have remembered the following:	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	
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	different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE	
You have completed the appointment type	I Further information	
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.	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	
You have included all former names used for	alternative format. Please visit the	
business purposes over the last 20 years You have enclosed a relevant Section 243	forms page on the website at	
application if applying for this at the same time as completing this form	www.companieshouse.gov.uk	
The new member has signed the form		
An authorising signature has been given by a designated member		
	1	

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