



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

LLP name in full: **EXFI NEOPLANTS II LLP**

LLP Number: **OC438090**



Received for filing in Electronic Format on the: **11/04/2022**

XB1QI8UO

---

## **New Appointment Details**

Date of Appointment: **29/07/2021**

Name: **KATERINA HAVRLANT**

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

Appointment is for a Member

Service Address: **NA MARNE 7 16000  
PRAGUE  
CZECH REPUBLIC**

Country/State Usually Resident: **CZECH REPUBLIC**

Date of Birth: **\*\*/12/1979**

## **Authorisation**

**Authenticated**

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

**Designated member, Judicial Factor.**