In accordance with regulation 19 of the Scottish Partnerships (Register of People with Significant control) Regulations 2017.

## SQP PSC01

Notice of individual person with significant control (PSC) of a Scottish qualifying partnership



✓ What this form is for
You may use this form to
give notice of an individual person
with significant control (PSC) of a
Scottish partnership (which is not
a limited partnership) which has
no natural person partners.

What this form is NOT You cannot use the form about a relevant legal er SQP PSCO2), or an other person (ORP) (use SQP P



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Do not use this form if any individual PSC is applying or has applied for protection from having their details disclosed on the public register.

Contact secureforms@companieshouse.gov.uk to get the correct form.

1	Partnership details	Filling in this form     Please complete in typescript or in bold black capitals.  All fields are mandatory unless specified or indicated by *
Registered number	S G 0 0 0 4 4 1	
Partnership name in	FALCON SP	
2	Date that individual became a registrable person <sup>©</sup>	Date that individual became a registrable person     This cannot be before 26 June 2017
Date	$\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d & d \end{bmatrix}$ $\begin{bmatrix} d & d & d & d & d & d & d & d & d & d $	
3	Individual's details	
Title*	Мг	O Country/State of residence This is in respect of the usual
Full forename(s)	Dan Daniel residential address as state section 4a.	
Surname	Becker Feldman	Month and year of birth     Please provide month and year     only. Provide full date of birth in     section 3a.
Country/State of residence	Mexico	
Nationality	Mexican	
Month/year of birth	X X	1
4	Individual's service address •	
	Please show the individual's service address below. You must also complete the usual residential address in <b>Section 4a</b> .	<ul> <li>Service address         This is the address that will appear on the public record. This does not have to be the individual's usual residential address.     </li> <li>If you provide the individual's residential address here it will appear on the public record.</li> </ul>
Building name/number	2nd Floor, Citi Building	
Street	P.O. Box N-1576, 14 University Drive	
Post town	Nassau	
County/Region		
Postcode		
Country	The Bahamas	

## Notice of individual person with significant control (PSC) of a Scottish qualifying partnership Nature of control for an individual • Please indicate how the individual is a person with significant control over the O Tick each that apply Only tick the 4th statement partnership. (Significant influence or control) if none of the previous statements Share of assets The individual holds, directly or indirectly, the right to the following percentage of the surplus assets of the partnership on a winding up (tick only one): more than 25% but not more than 50% more than 50% but less than 75% ☐ 75% or more Ownership of voting rights The individual holds, directly or indirectly, the following percentage of any voting rights in the partnership (tick only one): more than 25% but not more than 50% more than 50% but less than 75% ☐ 75% or more Ownership of right to appoint/remove management The individual holds, directly or indirectly, the right to appoint or remove a majority of the persons entitled to take part in the management of the partnership. Significant influence or control (Only tick if none of the above apply) The individual has the right to exercise, or actually exercises, significant influence or control over the partnership. Nature of control by a firm over which the individual has significant control Tick each that apply The individual has the right to exercise or actually exercises significant influence or control over the activities of a firm that is not a legal person under its governing law, and: the members of that firm (in their capacity as such) hold, directly or indirectly, the right to the following percentage of any surplus assets on a winding up of the partnership (tick only one): more than 25% but not more than 50% more than 50% but less than 75% ☐ 75% or more The members of that firm (in their capacity as such) hold, directly or indirectly, the following percentage of any voting rights in the partnership (tick only one): more than 25% but not more than 50% more than 50% but less than 75% 75% or more the members of that firm (in their capacity as such) hold the right, directly or indirectly, to appoint or remove a majority of the persons entitled to take part in the management of the partnership the members of that firm (in their capacity as such) have the right to exercise, or actually exercise, significant influence or control over the partnership.

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	qualifying partnership			
7	Nature of control by a trust over which the individual has			
<del></del>	significant control •			
	The individual has the right to exercise or actually exercises significant influence or control over the activities of a trust and:	Tick each that apply		
	the trustees of that trust (in their capacity as such) hold, directly or indirectly, the right to the following percentage of any surplus assets on a winding up of the partnership (tick only one):			
	more than 25% but not more than 50%			
	more than 50% but less than 75%			
	75% or more			
	The trustees of that trust (in their capacity as such) hold, directly or indirectly, the following percentage of any voting rights in the partnership (tick only one):  more than 25% but not more than 50% more than 50% but less than 75% 75% or more			
	the trustees of that trust (in their capacity as such) hold the right, directly or indirectly, to appoint or remove a majority of the persons entitled to take part in the management of the partnership			
	the trustees of that trust (in their capacity as such) have the right to exercise, or actually exercise, significant influence or control over the partnership.			
8	Signature			
	1 am signing this form on behalf of the partnership.	You must have obtained confirmation from the individual		
Partner's signature	Signature & Short & Sh	person with significant control that their particulars are correct before sending this form to Companies House.		
	Georgette Dames			
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Presenter information	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.	All information on this form will appear on the public record, apart from information relating to usual residential addresses and day of birth.
Contact name	
Company name	<b>™</b> Where to send
Address	You may return this form to any Companies House address, however for expediency we advise you treturn it to the address below:
Post town	The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF.
County/Region	DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post).
Postcode	
Country	
DX	
Telephone	
✓ Checklist	
We may return forms completed incorrectly or with information missing.	
Please make sure you have remembered the	1
following:  The partnership name and number match the information held on the public register.	
You have completed the date that the individual became a registrable person.	1
☐ You have completed the individual's details.☐ Addresses must be a physical location. They cannot	<b>i</b> Further information
be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number.  You have shown the nature of control.	For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk
You have signed the form.	
	This form is available in an alternative format. Please visit the
	forms page on the website at
	www.gov.uk/companieshouse