



Please complete in typescript, or in bold black capitals.

CHWP000

LLP288a

(LLP Act 2000 Section 9)

Appointment of a Member to a Limited Liability Partnership

(NOT for terminating membership (use Form LLP288b) or change of particulars (use Form LLP288c))

LLP Number

Full Name of Limited Liability Partnership

Date of appointment
Day Month Year

* Voluntary Member Reference Number *
Information (As advised by Companies House)

Date of birth
Day Month Year

Peers or others known by a title may use the title instead of or in addition to their name

Surname or Corporate name

Forename(s)

Usual residential address **

** Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation, give the registered or principal office address.

Post town UK Postcode

County / Region Country

Designated member (Please tick appropriate box) YES NO

I consent to act as a member of the above named limited liability partnership

Consent signature Date

Another Member being a Designated Member must sign and date the form in the boxes below.

Signed Date

Designated Member

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on

Tel
DX number DX exchange

TUESDAY



PC3 08/09/2009 937
COMPANIES HOUSE

Form October 2003

When you have completed and signed the form please send it to the Registrar of Companies at:
Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
for partnerships registered in England and Wales
or
Companies House, 139 Fountainbridge, Edinburgh, EH3 9FF
for partnerships registered in Scotland

DX 235 Edinburgh
or LP - 4 Edinburgh 2