

LL AP01

Appointment of member of a Limited Liability Partnership(LLP)

LLP Number:			
LLP Name:			
Date of Appointment:		Date of Birth:	
Title:		Place of Birth:	
Forename(s):		Country of Residence:	
Surname:		Mothers Maiden Name:	
Former Name(s):		Telephone Number:	
Nationality:			
Email Address:			

This form is intended for use by Tax Innovations clients only and is not a replacement to the Companies House form with the same title. Professional guidance should always be sought after when completing forms asking for personal information. If you have any questions concerning the content of this form please contact Tax Innovations Ltd.

Tax Innovations Limited - Registered in England: 3062165

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Innovations House, 19 Staple Gardens
Winchester, Hampshire, SO23 8SR

London office

t. 020 7917 2824

Tax Innovations, London Office
180 Piccadilly, London, W1J 9HF

Are you being appointed as a Designated Member?

☐ Yes

☐ No

Member's Residential Address:

Postcode:

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Country:

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Member's Service Address: Same as Residential ☐

Postcode:

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Country:

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New Member's Signature:

By signing this form you are consenting to being appointed as a Partner of the LLP on the above appointment date.

.....

Authorising Signature:

This form must be authorised by a Designated Member

.....

Authorised by:

Position in Company:

Please post an original signed copy of this form to Tax Innovations Ltd.

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