

Limited Liability Partnership Questionnaire

TO PLACE YOUR ORDER PLEASE COMPLETE AND RETURN THIS QUESTIONNAIRE TOGETHER WITH FORM LLIN01.

1 NAME 1

PLEASE STATE NAME REQUIRED

We will advise name availability or report identical names.

We will form your Limited Liability Partnership with the words 'LIMITED LIABILITY PARTNERSHIP' in full unless otherwise indicated.

please tick appropriate boxes ✓

LIMITED LIABILITY PARTNERSHIP

2 REGISTERED OFFICE 2

If you wish, our address at Pembroke House, 7 Brunswick Square, Bristol BS2 8PE can be used as the Partnership's Registered Office address for receiving all official mail, which will be forwarded to a designated address.

please tick ✓ per annum **£ 100.00**

Otherwise, please confirm what will be the Registered Office address of the Limited Liability Partnership:

POSTCODE

3 LEVER PRESS SEAL 3

The Professional pack will include a hand held company plier seal. If you would like a larger, desktop seal then indicate here.

please tick ✓ additional **£ 35.00**

4 NAME PLATE 4

A Limited Liability Partnership must paint or affix its name on the outside of every office or place in which its business is carried on.

If you would like either a brass name plate or a laminate name plate to affix outside your offices then please indicate here

Brass Name Plate – size (8" x 4")

Brass Name Plate **£ 35.00**

Laminate Name Plate – size (8" x 4")

Laminate Name Plate **£ 25.00**



Please only complete this section if you are taking advantage of our Professional package (see Section 7) below.

EFFECTIVE DATE OF THE AGREEMENT

Unless stated otherwise, we will date the Members' Agreement at the Date of Registration of the Partnership.

However, it is possible for the Agreement to be dated prior to the date of Registration. If you wish the Date of Agreement to be different from the Date of Registration then please state below.

Effective Date of the Agreement _____

BUSINESS ACTIVITIES

Please provide details of the principal business activities of the Partnership. Attach a separate sheet if appropriate.

BUSINESS ACTIVITIES

.....
PARTNERSHIP'S AUDITORS

Please provide details of the Auditors of the Partnership.

Name _____

Address _____

.....
ACCOUNTING REFERENCE DATE

The Partnership's year end for accounting purposes will be the last day of the month in which the anniversary of incorporation falls, unless you decide otherwise. In this case it will be necessary to inform the Registrar of Companies before the first accounts have to be filed, using partnership form LLA01.

Please confirm the desired Accounting Reference Date.

The first accounting period will end on

PLEASE ONLY COMPLETE THIS SECTION IF YOU ARE TAKING ADVANTAGE OF OUR PROFESSIONAL PACK (SEE SECTION 7) BELOW.

A Limited Liability Partnership must have a minimum of two Members. If there are only two Members then they must both be Designated Members; if there are more than two Members then at least two must be Designated Members. Designated Members have additional responsibilities under the Act. Please provide details of the Members of the Limited Liability Partnership below.

please tick appropriate boxes ✓



NAME _____

Address _____

Is this person a Designated Member? Yes No

Capital amount contributed to the Partnership £ _____

Amount of profits payable to this Member % _____

Number of votes assigned to this Member _____

NAME _____

Address _____

Is this person a Designated Member? Yes No

Capital amount contributed to the Partnership £ _____

Amount of profits payable to this Member % _____

Number of votes assigned to this Member _____

NAME _____

Address _____

Is this person a Designated Member? Yes No

Capital amount contributed to the Partnership £ _____

Amount of profits payable to this Member % _____

Number of votes assigned to this Member _____

NAME _____

Address _____

Is this person a Designated Member? Yes No

Capital amount contributed to the Partnership £ _____

Amount of profits payable to this Member % _____

Number of votes assigned to this Member _____

If there are to be more than four initial Members then please tick box and attach a separate sheet



The following are also available as Same-Day Incorporation Packages:

BASIC PACKAGE

Certificate of Registration only

PROFESSIONAL PACK

Certificate of Registration, one bound completed Members' Agreement for each stated Member plus a further copy for the Partnership's records, blank Partnership Registers & Certificates of Membership, company form LLAA01, company plier seal

With completed Partnership Registers & Certificates of Membership

ADDITIONAL SERVICES

Registered Office facility, per annum

Additional copy Members Agreement _____ required

Lever Press Seal

Every Limited Liability Partnership must paint or affix its name on the outside of every office or place in which its business is carried on.

Brass Name Plate – size (8" x 4")

Laminate Name Plate – size (8" x 4")

please tick appropriate boxes ✓

Same-day supplement extra £ 150.00

Basic Pack £ 95.00

Professional pack £ 200.00

Completed Registers extra £ 50.00

Reg. Office Facility per annum £ 100.00

Additional Agreement per copy £ 7.50

Lever Press Seal extra £ 35.00

Brass Name Plate £ 35.00

Laminate Name Plate £ 25.00

Please find enclosed a cheque payable to Bourse Company Services Limited in the sum of

All prices include VAT.

Bourse Company Services will not be liable in any manner whatsoever in respect of a name which could not reasonably be foreseen at the date of your search, being one to which the Secretary of State or a third party would take objection. All goods and services are provided on the terms of the Company's Standard Conditions of Business, copies of which are available on application to the Company.

£

Credit card number

Start Date (if any) Validation Code* *last three digits on reverse of card

Expires Issue Number (if any)

I wish to pay by Mastercard Visa Debit Card please tick appropriate box ✓

My Credit Card number and expiry date are as above. Please debit my account with the amount due.

Cardholders name _____

Signature _____ Date _____

YOUR DETAILS please complete in all cases

Company (if applicable) _____

Contact _____ Ref (optional) _____

Address _____

Dx/Britdoc No (if applicable) _____

Phone _____ Fax _____

E-mail _____



company formation

- READY-MADE/MADE TO MEASURE
FLAT MANAGEMENT
GUARANTEE COMPANIES
UNLIMITED COMPANIES • PLCS
REGISTERS • NAME PLATES • SEALS

property and company searches

- COMPANY SEARCHES • CREDIT/STATUS REPORTS
PERSONAL LOCAL AUTHORITY SEARCHES
ENVIRONMENTAL SEARCHES
PROPERTY SEARCHES
PLANNING, FLOODING, CONTAMINATED LAND SEARCHES

corporate services

- SPECIFIC ARTICLES
CREATION OF DIFFERENT SHARE CLASSES
BONUS ISSUES • PURCHASE OF OWN SHARES
RE-REGISTRATION • SECRETARIAL AND NOMINEE SERVICES
OVERSEAS/OFFSHORE COMPANIES

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

A4

Registered office address ①

	Please give the registered office address of your LLP.						
Building name/number							
Street							
Post town							
County/Region							
Postcode							

① Registered office address

You must ensure that the address shown in this section is consistent with the situation indicated in section A3.

You must provide an address in England or Wales for LLPs to be registered in England and Wales.

You must provide an address in Wales, Scotland or Northern Ireland for LLPs to be registered in Wales, Scotland or Northern Ireland respectively.

A5

Members' designation

Will all members from time to time be designated members? ②
<input type="checkbox"/> Yes
<input type="checkbox"/> No

② Members' designation

If 'Yes' all members named will be designated. If 'No' at least two members named must be designated.

Part 2 Proposed officers

- For a member who is an individual, go to Section B1.
- For a corporate member, go to Section C1.

There must be two designated members at all times. Unless there are at least two designated members all members will be designated.

Member

B1 Member appointments ①

Please use this section to list all the member appointments taken on formation.
For a corporate member complete C1-C5.

Title*	
Full forename(s)	
Surname	
Former name(s) ②	
Country/State of residence ③	
Date of birth	d d m m y y y y
Designated member ④	Please tick this box if you are consenting to act as a designated member. <input type="checkbox"/>

① Appointments

For corporate member appointments, please complete section C1-C5 instead of section B.

② Former name(s)

Please provide any previous names which have been used for business purposes in the last 20 years. Married women do not need to give former names unless previously used for business purposes.

③ Country/State of residence

This is in respect of your usual residential address as stated in Section B4.

④ Designated member

There must be at least two designated members at all times.

Additional appointments

If you wish to appoint more members, please use the 'Member appointments' continuation page.

B2 Member's service address ⑤

Please complete the service address below. You must also fill in the member's usual residential address in Section B4.

Building name/number	
Street	
Post town	
County/Region	
Postcode	
Country	

⑤ Service address

This is the address that will appear on the public record. This does not have to be your usual residential address.

Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of members' particulars as the LLP's registered office.

If you provide your residential address here it will appear on the public record.

B3 Signature ⑥

I consent to act as member of the proposed LLP named in Section A1.

Signature	Signature X	X
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⑥ Signature

The person named above consents to act as member of the proposed LLP.

This page is not shown on the public record



Do not cover this barcode

B4

Member's usual residential address ^①

	Please complete your usual residential address below.						
Building name/number							
Street							
Post town							
County/Region							
Postcode							
Country							

① New member's usual residential address

Please state 'Same as service address' in this section if your usual residential address is recorded in the LLP's proposed register of member's residential addresses as 'Same as the service address'.

You cannot state 'Same as service address' if your service address has been stated in section B2 as 'The LLP's Registered Office'. You will need to complete the address in full.

This address cannot be a PO Box, DX or LP (Legal Post in Scotland) number.

Section 243 of Companies Act 2006 as applied to LLPs by The Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009.

Section 243 exemption ^②

Only tick the box below if you are in the process of applying for, or have been granted, exemption by the Registrar from disclosing your usual residential address to credit reference agencies under section 243 of the Companies Act 2006 as applied to LLPs by The Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009.

Different postal address:

If you are applying for, or have been granted, a section 243 exemption, please post this whole form to the different postal address below:
The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE.

Where you are applying for a section 243 exemption with this notice, the application and this form must be posted together.

② If you are currently in the process of applying for, or have been granted, a section 243 exemption, you may wish to check you have not entered your usual residential address in section B2 as this will appear on the public record.

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Member

B1	Member appointments ①	
Please use this section to list all the member appointments taken on formation. For a corporate member, complete Section C1-C5.		① Appointments For corporate member appointments, please complete section C1-C5 instead of Section B.
Title*		② Former name(s) Please provide any previous names which have been used for business purposes in the last 20 years. Married women do not need to give former names unless previously used for business purposes. ③ Country/State of residence This is in respect of your usual residential address as stated in section B4. ④ Designated member There must be at least two designated members at all times. Additional appointments If you wish to appoint more members, please use the 'Member appointments' continuation page.
Full forename(s)		
Surname		
Former name(s) ②		
Country/State of residence ③		
Date of birth	d d m m y y y y	
Designated member ④	Please tick this box if you are consenting to act as a designated member. <input type="checkbox"/>	

B2	Member's service address ⑤	
Please complete the service address below. You must also fill in the member's usual residential address in Section B4 .		⑤ Service address This is the address that will appear on the public record. This does not have to be your usual residential address. Please state 'The LLP's Registered Office' if your service address will be recorded in the LLP's register of members' particulars as the LLP's registered office. If you provide your residential address here it will appear on the public record.
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		

B3	Signature ⑥	
I consent to act as member of the proposed LLP named in Section A1 .		⑥ Signature The person named above consents to act as member of the proposed LLP.
Signature	Signature X	X

This page is not shown on the public record



Do not cover this barcode

B4

Member's usual residential address ^①

	Please complete your usual residential address below.						
Building name/number							
Street							
Post town							
County/Region							
Postcode							
Country							

① New member's usual residential address

Please state 'Same as service address' in this section if your usual residential address is recorded in the LLP's proposed register of member's residential addresses as 'Same as the service address'.

You cannot state 'Same as service address' if your service address has been stated in section B2 as 'The LLP's Registered Office'. You will need to complete the address in full.

This address cannot be a PO Box, DX or LP (Legal Post in Scotland) number.

Section 243 of Companies Act 2006 as applied to LLPs by The Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009.

Section 243 exemption ^②

Only tick the box below if you are in the process of applying for, or have been granted, exemption by the Registrar from disclosing your usual residential address to credit reference agencies under section 243 of the Companies Act 2006 as applied to LLPs by The Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009.

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The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE.

Where you are applying for a section 243 exemption with this notice, the application and this form must be posted together.

② If you are currently in the process of applying for, or have been granted, a section 243 exemption, you may wish to check you have not entered your usual residential address in section B2 as this will appear on the public record.

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Corporate member

C1 Corporate member appointments¹	
Please use this section to list all the corporate members of the LLP.	
Name of corporate body or firm	
Building name/number	
Street	
Post town	
County/Region	
Postcode	
Country	
Designated member ²	Please tick this box if you are consenting to act as a designated member. <input type="checkbox"/>
C2 Location of the registry of the corporate body or firm	
Is the corporate member registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3 EEA companies ³	
Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register.	
Where the company/firm is registered ⁴	
Registration number	
C4 Non-EEA companies	
Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	
Legal form of the corporate body or firm	
Governing law	
If applicable, where the company/firm is registered ⁵	
If applicable, the registration number	
C5 Signature ⁶	
I consent to act as member of the proposed LLP named in Section A1 .	
Signature	Signature X
1 Registered or principal address This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number.	
2 Designated member There must be at least two designated members at all times.	
Additional appointments If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page.	
3 EEA A full list of countries of the EEA can be found in our guidance: www.companieshouse.gov.uk	
4 This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC).	
5 Non-EEA Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register	
6 Signature The person named above consents to act as corporate member of the proposed LLP.	

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Corporate member

C1 Corporate member appointments¹	
Please use this section to list all the corporate members of the LLP.	
Name of corporate body or firm	
Building name/number	
Street	
Post town	
County/Region	
Postcode	
Country	
Designated member ²	Please tick this box if you are consenting to act as a designated member. <input type="checkbox"/>
C2 Location of the registry of the corporate body or firm	
Is the corporate member registered within the European Economic Area (EEA)? → Yes Complete Section C3 only → No Complete Section C4 only	
C3 EEA companies ³	
Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register.	
Where the company/firm is registered ⁴	
Registration number	
C4 Non-EEA companies	
Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.	
Legal form of the corporate body or firm	
Governing law	
If applicable, where the company/firm is registered ⁵	
If applicable, the registration number	
C5 Signature ⁶	
I consent to act as member of the proposed LLP named in Section A1 .	
Signature	Signature X
1 Registered or principal address This is the address that will appear on the public record. This address must be a physical location for the delivery of documents. It cannot be a PO box number (unless contained within a full address), DX number or LP (Legal post in Scotland) number.	
2 Designated member There must be at least two designated members at all times.	
Additional appointments If you wish to appoint more than one corporate member, please use the 'Corporate member appointments' continuation page.	
3 EEA A full list of countries of the EEA can be found in our guidance: www.companieshouse.gov.uk	
4 This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC).	
5 Non-EEA Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register	
6 Signature The person named above consents to act as corporate member of the proposed LLP.	

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)

Part 3

Signature

I certify that I am a

- Solicitor engaged in the formation of this LLP
- Member named of this LLP

and that two or more persons named in this form are associated for carrying on lawful business with a view to profit.

I am signing this form on behalf of the LLP

Signature

Signature

X

X

LL IN01

Application for the incorporation of a Limited Liability Partnership (LLP)



Presenter 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.

Contact name

Company name

Address

Post town

County/Region

Postcode

Country

DX

Telephone



Certificate

We will send your certificate to the presenters address (shown above) or if indicated to another address shown below:

At the registered office address (Given in Section A4).



Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- You have checked that the proposed LLP name is available and the various rules that may affect your choice of name. More information can be found in guidance on our website.
- If the name of the company is the same as one already on the register as permitted by The Company and Business Names (Miscellaneous Provisions) Regulations 2008, please attach consent.
- You have used the correct appointment section.
- Any addresses given 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.
- There are at least two designated members.
- The document has been signed, where indicated.
- You have enclosed the correct fee.
- All relevant attachments have been included.



Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.



How to pay

A fee is payable on this form.

Make cheques or postal orders payable to 'Companies House'. For information on fees, go to: www.companieshouse.gov.uk



Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:

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 different postal address below:

The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE.



Further information

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 alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk