





LIMITED LIABILITY PARTNERSHIPS (JERSEY) LAW 2017 Amendment of Declaration pursuant to Article 19 of the Law Changes applicable to Limited Liability Partnerships

What this form is for?

You may use this form to provide the Jersey Financial Services Commission (THE "JFSC") with information relating to changes effecting a limited liability partnership. In particular, this form should be used to inform the JFSC of changes to the partnerships name, registered office address, Partners, Secretary, Deputy Secretary (if any) and the duration for which the limited liability partnership will exist.

We draw attention that Part A of this form will be publically available information, accessible by performing a company search.

Part B of this form is held by the JFSC on a confidential basis and will only be shared with Government departments and agencies.

Exchange of Notes

Changes made to a declaration may result in an update of information held on our register of beneficial owners and controllers. Accordingly, it is important to understand how the Commission may share information that affects the beneficial owners and controllers register. The Commission must collect information relating to beneficial ownership and control in accordance with the Exchange of Notes entered into between the Government of the United Kingdom and the Government of Jersey dated 13 April 2016. Please see the JFSC information sharing agreement dated 30 June 2017 (as amended) which explains how the JFSC shares beneficial ownership and control information with the JFCU and UK Government agencies. Information shared includes but is not limited to names, address and date of birth.

Information you need to complete this form?

Registered name, registered office address, full name(s) and address of Partners, full name and address of Secretary and Deputy Secretary (if any) as well as any applicable email addresses.

Where to send

You may return this form to the Registry at the JFSC.

Checklist

We may return your form if it has been completed incorrectly or it has information missing. Check, before submitting this form that:
all the relevant details have been entered correctly; and
you have signed the form

Note: This form, once registered, will be publicly available



Part A	
1 Insert Registered Limited Liability Partnership Name	
2 Date of Change	
2 Date of Change	
3 Nature of Change	_
3.1 Change of Limited Liability Partnership name	
3.2 Change of Registered Office Address	
3.3 Appointment and or/Removal of Secretary/ Deputy Secretary	
3.4 Change of name of Existing Secretary/ Deputy Secretary	
3.5 Change of Address of Existing Secretary/ Deputy Secretary	
3.6 Appointment or Retirement of Partners	
3.7 Change of Term	
4 Change of Limited Liability Partnership name (insert new name)	
5 New Registered Office Address	
Parish	Postcode DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD
Is the Registered Office of the Limited Liability Partnership Provided Business (TCB)?	by a Jersey Regulated Trust Company
Yes	
∐ No	
if yes please provide TCB Name	
Name	



6 Appointment/ Removal of			(17)	
Select as Appropriate:	Corporate Secretary	Secretar	y (if any) to be appointed or removed Corporate Deputy Secretary	,
Corporate Name	Appoint	Ц	Remove	Ц
Registered Office Address	of Company			
Parish			Postcode DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD	
Corporate Registration Nu	mber			
Select as Appropriate	Secretary (Who is an individ	dual) 🔲	Deputy Secretary (Who is an individu	ual)
Surname				
Forename				
Address				
Addiess				
Parish			Postcode Postcode	
7 Change of name of Existing	g Secretary/ Deputy Secreta	ıry		
Current name				
New name				



8 Change of Address of existing Secretary/ Deputy Secretary
Name of existing Secretary/Deputy Secretary
New address of Secretary/Deputy Secretary
Parish Postcode Postcode
9 Appointment of Retirement of Partners
The full name and address of each Partner who is a corporate and to whom Article 2(1) of the Law applies
Select as Appropriate Appoint Retire
Corporate name
Registered office address of corporate
Parish Postcode Postcode
Registration number
Select as Appropriate Appoint Retire
Corporate name
Registered office address of corporate
Parish Postcode Postcode
Registration number



Select as Appropriate	Appoint 🗌	Retire 🔲	
Corporate name			
Registered office address of	corporate		
Parish		Postcode Postcode	
Registration number			
The full name and address of	of each Partner who is a c	corporate and to whom Article 2(1) of the Lav	w applies
Select as Appropriate	Appoint	Retire	
Surname			
Forename			
Address			
Parish		Postcode Postcode	
Select as Appropriate	Appoint	Retire	
Surname			
Forename			
Address			
Parish		Postcode Postcode	



Select as Appropriate	Appoint	Retire
Surname		
Forename		
Address		
Parish		Postcode Postcode
Select as Appropriate	Appoint	Retire
Surname		
Forename		
Address		
Parish		Postcode Postcode



10 Change of term	
The Term of which the Limited Liability Partnership will exist (if for an	unlimited duration please state)
I/We (Secretary/Person authorised by the Limited Liability Partnersh this declaration in Part A and Part B are true and correct and that for Liability Partnerships (Jersey) Law 2017.	
Signature	
Print full name of signature	Date
Signature	<u> </u>
Print full name of signature	



Part B

1 Email address of secretary

Provisions of the Limited Liability Partnership (Jersey) Law 2017 and Limited Liability Partnership (Dissolution and Winding Up) (Jersey) Regulations 2018 requires various certificates to be served on the Secretary. The Registrar of Companies may serve these certificates to the Secretary by email.

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