## **FiLLiP**

Form language

## Form for Incorporation of Limited Liability Partnership

[Pursuant to Rule 8, Rule 11 and Rule 18 of Limited Liability Partnership Rules, 2009]

गरत सरकार			
Refer instruction kit for filing the form			
All fields marked in * are mandatory.			
Part A: Incorporation document			
1.Purpose of filing the			
form (a) *Whether name is already approved by Registrar of Cor	npanies	○ Yes	No     No     No
(b) Service Request Number (SRN) of RUN-LLP			
(c) *Type of incorporation			
<ul><li>New incorporation</li></ul>	Conversion of firm i	nto LLP	
$\bigcirc$ Conversion of private company/unlisted public compar	ny into		
(d) CIN			
2.Particulars of the proposed or approved name			
(a) *Proposed or approved name			IIGHWAY MOTORS LLP
(b) *Significance of abbreviated or coined word in the pro	posed name	NO ABBREV USED	IATED OR COINED WORD
(c) $*$ State the name of the vernacular language(s) if used in thereof	the proposed name and meaning	NO SUCH LA	ANGUAGE USED
(d) *Whether the proposed name is based on a trademark r			
an application pending for registration under the Tradema	rks Act	○ Yes	<ul><li>No</li></ul>
* If yes, furnish particulars of trademark or application			
Attachments			
(a) In principle approval of regulatory authority, if required.	Max 2 MB		Choose file
(b) Approval of the owner of the trademark or the applicant of			
such application for registration of Trademark;	Max 2 MB		Choose file
(c) Copy of approval in case the proposed name contains any word(s) or expression(s) which requires approval from central			Character Char
government;	Max 2 MB		Choose file

(d) Copy of approval from the competent authority in case of				
collaboration and connection with the foreign country or place		Max 2 MB		Choose file
(e) Copy of Board resolution of the existing company or consent		M 2 MD		Choose file
of existing LLP as a proof of no objection		Max 2 MB		CHOOSE IIIC
3 (a) Address of registered office of LLP				
*Address Line I			G-84, PALAM	
*Address Line II			EXTENSION	
*Country			India	
*Pin code / Zip Code			110045	
*area			Palam Village	
*City			New Delhi	
District			South West Delhi	
*State / UT			Delhi 	
*Longitude			28.5966	
*Latitude			77.0826	
*Jurisdiction of Police Station			POLICE STATION PALAI	M
(b) Contact Details				
Phone (with STD/ISD code)				
*Mobile No			98*****90	
Fax				
*Email ID			ar*************il.co	m
c) Attachments				
(a) *Proof of Office address along with NOC, if applicable (Conveyance/ Lease deed/Rent Agreement along with rent	Λ	Max 2 MB		Choose file
receipts); (b) *Copy of the utility bills (not older than two months);		Max 2 MB		Choose file
	<u>'</u>			
(d) * Name of the office of Registrar in whose jurisdiction the be registered	e proposed LLP is to		Registrar of Companies Capital Territory of Dell	

4.Details of	business activity carried out by	LLP on incorporation	/conversion		
Primary (checkbo	x) per NIC codes 2008)	Descripti	ion of NIC code		
$\triangleright$	49223	Rental of private cars with driver		Delete	
					Delete
					Delete
•	on of industrial activities to be carr	ied out by the			
(a) *Main i	ndustrial activity				
*- NIC code				49223	
*- Descriptio	on of NIC code			Rental	of private cars with driver
-	industrial activity			,	<b>-</b>
- NIC code					
-	on of NIC code	4.4			
5.Total num	ber of designated partners and	partners of the LLP	Having valid DIN/	DPIN	
	Particulars		Traving valid birth	D1 114	Not having valid DIN/DPIN
1 Numb	per of Designated Partners		0		4
A - Indiv	riduals		0		4
B - Body	corporates and their nominees		0		0
2 Numb	er of Partners other than Designat	ted Partners	0		0
A - Indiv	riduals				
	corporates and their nominees		0		0
	number of Partners and Designate	d Partners	0		4
			0		<u> </u>
<b>DPIN</b> (i) *Basic	culars of individual designated paded partner details of Designated partner details partner ldentification number				
*Name					
*Whethe	r resident of India				
○ No					
In case of conversion	f company seeking on				
Number	of shares held				
-	value of shares held (in INR)				
(ii) *Desc	ription of contribution				
	contribution ion/Cash /Other than cash)				

If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director	
B *Particulars of individual designated partners not having DIN/DPIN	
(i) *Basic details of Designated partner	
First Name	SOURBH
Middle Name	
Surname	SINHA
Father's First name	GIRISH
Father's Middle name	
Father's Surname	CHANDRA
*Gender	
( Male/Female/ Transgender)	Male
*Date of Birth (dd/mm/yyyy)	03/06/1988
*Nationality	India
*Whether resident of India	
<b>●</b> Yes	
○ No	
*Income-tax PAN/Passport number	
PAN     Passport number	
O assport number	
*Income-tax PAN/Passport number details	FT****5F
*Place of Birth (State)	Delhi
*Place of Birth (District)	South West Delhi
*Whether citizen of India	
○ No	
*Occupation type	
(Business/Professional/Government Employment/Private Employment /Housewife/Student/Others)	
Employment invate Employment / Housewite/Student/Others)	Business
Description of others	
*Area of Occupation	Others
If 'Others' selected, please specify	BUSINESSMAN

*Educational Qualification (Primary education/Secondary education Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/ Diploma /Others)	Bachelor's degree
If 'Others' selected, please specify	
*Mobile No	+91******17
*Email ID	so******il.com
(ii) *Permanent address	
*Address Line I	G-84 A PALAM EXTENSION
*Address Line II	SECTOR-7 DWARKA
*Country	India
*Pin code / Zip Code	110045
*Area/ Locality	Palam Village
*City	New Delhi
District	South West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	PALAM POLICE STATION
Phone (with STD/ISD code) (iii) * Whether present residential address same as permanent residential address	
·	
• Yes	
○ No	
○ No *Present address	
○ No	G-84 A PALAM EXTENSION
○ No *Present address	G-84 A PALAM EXTENSION SECTOR-7 DWARKA
No *Present address  *Address Line I	
No *Present address  *Address Line I  *Address Line II	SECTOR-7 DWARKA
No *Present address  *Address Line I  *Address Line II  *Country	SECTOR-7 DWARKA
<ul> <li>No</li> <li>*Present address</li> <li>*Address Line I</li> <li>*Address Line III</li> <li>*Country</li> <li>*Pin code / Zip Code</li> </ul>	SECTOR-7 DWARKA India
<ul> <li>No</li> <li>*Present address</li> <li>*Address Line I</li> <li>*Country</li> <li>*Pin code / Zip Code</li> <li>*Area/ Locality</li> </ul>	SECTOR-7 DWARKA  India  1 10045  Palam Village
No *Present address  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City	SECTOR-7 DWARKA  India  110045  Palam Village  New Delhi
*No *Present address  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District	SECTOR-7 DWARKA India 110045 Palam Village New Delhi South West Delhi
*Present address  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station	SECTOR-7 DWARKA  India  110045  Palam Village  New Delhi  South West Delhi  Delhi
*Present address  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Phone (with STD/ISD code)	SECTOR-7 DWARKA  India  110045  Palam Village  New Delhi  South West Delhi  Delhi
*Present address  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station	SECTOR-7 DWARKA  India  110045  Palam Village  New Delhi  South West Delhi  Delhi

*If Duration of stay at present address is less than one year then address of previous residence	
(iv) *Identity Proof	
(Voters Identity Card/Passport/Driving License/Aadhaar)	Aadhaar
*Residential Proof (Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarized Rent Agreement)	d Bank Statement
*Identity Proof No.	647629692213
*Residential Proof No.  *Submit a copy of the proof of identity and proof of address  *Proof of identity	XXXXXXX1308
Max 2 MB	
*Residential proof	
Max 2 MB	
(v)In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)	
(vi) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	Cash
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	5000
*Monetary value of contribution (in words)	Five Thousand
*Number of LLP(s) in which he/ she is a partner	o
*Number of company(s) in which he/ she is a director	D
(i) *Basic details of Designated partner	
First Name	suresh
Middle Name	
Surname	VERMA
Father's First name	RAMJEET
Father's Middle name	
Father's Surname	VERMA
*Gender ( Male/Female/ Transgender)	Male
*Date of Birth (dd/mm/yyyy)	02/10/1980
*Nationality	India

*Whether resident of India	
<ul><li>Yes</li></ul>	
○ No	
*Income-tax PAN/Passport number	
● PAN	
O Passport number	
*Income-tax PAN/Passport number details	AJ*****3K
*Place of Birth (State)	Delhi
*Place of Birth (District)	West Delhi
*Whether citizen of India	
<ul><li>Yes</li></ul>	
○ No	
*Occupation type	
(Business/Professional/Government Employment/Private Employment /Housewife/Student/Others)	
Employment/Filvate Employment/Housewhe/Student/Others)	Business
Description of others	
*Area of Occupation	Others
If 'Others' selected, please specify	BUSINESSMAN
*Educational Qualification (Primary education/Secondary education Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/ Diploma /Others)	Bachelor's degree
If 'Others' selected, please specify	
*Mobile No	+91******55
*Email ID	ve************il.com
(ii) *Permanent address	
*Address Line I	B-100 MAHAVIR ENCLAVE,
*Address Line II	PART-II GALI NO. 24
*Country	India
*Pin code / Zip Code	110059
*Area/ Locality	Uttam Nagar
*City	New Delhi
District	West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	UTTAM NAGAR POLICE STATION
Phone (with STD/ISD code)	
(iii) * Whether present residential address same as permanent residential address	
<ul><li>Yes</li></ul>	

○ No *Present address	
*Address Line I	B-100 MAHAVIR ENCLAVE,
*Address Line II	PART-II GALI NO. 24
*Country	India
*Pin code / Zip Code	110059
*Area/ Locality	Uttam Nagar
*City	New Delhi
District	West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	UTTAM NAGAR POLICE STATION
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
*If Duration of stay at present address is less than one year then address of previous residence  (iv) *Identity Proof	
(Voters Identity Card/Passport/Driving License/Aadhaar)	Aadhaar
*Residential Proof (Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarized Rent Agreement)	Bank Statement
*Identity Proof No.	693824240643
*Residential Proof No.  *Submit a copy of the proof of identity and proof of address	1503000109033346
*Proof of identity	
Max 2 MB	
*Residential proof  Max 2 MB	
(v)In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)	
(vi) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	Cash

If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	5000
*Monetary value of contribution (in words)	Five Thousand
*Number of LLP(s) in which he/ she is a partner	0
*Number of company(s) in which he/ she is a director	0
(i) *Basic details of Designated partner	
First Name	SACHIN
Middle Name	
Surname	SINHA
Father's First name	GIRISH
Father's Middle name	
Father's Surname	CHANDRA
*Gender ( Male/Female/ Transgender)	Male
*Date of Birth (dd/mm/yyyy)	03/06/1988
*Nationality	India
*Whether resident of India	
<ul><li>Yes</li></ul>	
○ No	
*Income-tax PAN/Passport number	
● PAN	
○ Passport number	
*Income-tax PAN/Passport number details	FV*****1B
*Place of Birth (State)	Delhi
*Place of Birth (District)	South West Delhi
*Whether citizen of India	
<ul><li>Yes</li></ul>	
○ No	
*Occupation type	
(Business/Professional/Government Employment/Private Employment /Housewife/Student/Others)	
Employment / Twate Employment / Trousewite, Stadenty outlers,	Business
Description of others	
*Area of Occupation	Others
If 'Others' selected, please specify	BUSINESSMAN
*Educational Qualification (Primary education/Secondary education	
uriman, oducation /s ocondan, oducation	

Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/	Bachelor's degree
If 'Others' selected, please specify	
*Mobile No	+91*****42
*Email ID	sa******il.com
(ii) *Permanent address	
*Address Line I	G-84 A PALAM EXTENSION
*Address Line II	SECTOR-7 DWARKA
*Country	India
*Pin code / Zip Code	110045
*Area/ Locality	Palam Village
*City	New Delhi
District	South West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	PALAM POLICE STATION
Phone (with STD/ISD code)	
(iii) * Whether present residential address same as permanent residential address	
• Yes	
○ No	
*Present address	
*Address Line I	G-84 A PALAM EXTENSION
*Address Line II	SECTOR-7 DWARKA
*Country	India
*Pin code / Zip Code	110045
*Area/ Locality	Palam Village
*City	New Delhi
District	South West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	PALAM POLICE STATION
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
*If Duration of stay at present address is less than one year then address of previous residence	
(iv) *Identity Proof	

(Voters Identity Card/Passport/Driving License/Aadhaar)	Driving License
*Residential Proof (Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarize	d
Rent Agreement)	Bank Statement
*Identity Proof No.	DL0920080270895
*Residential Proof No.	00000020050216932
*Submit a copy of the proof of identity and proof of address	
*Proof of identity  Max 2 MB	
*Residential proof	
Max 2 MB	
(v)ln case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)	
(vi) *Description of contribution	
*Form of contribution	
(Conversion/Cash /Other than cash)	Cash
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	5000
*Monetary value of contribution (in words)	Five Thousand
*Number of LLP(s) in which he/ she is a partner	þ
*Number of company(s) in which he/ she is a director	þ
(i) *Basic details of Designated partner	
First Name	SANJEEV
Middle Name	KUMAR
Surname	SUMAN
Father's First name	MATHURA
Father's Middle name	PRASAD
Father's Surname	PANJIAR
*Gender ( Male/Female/ Transgender)	Male
*Date of Birth (dd/mm/yyyy)	05/02/1971
*Nationality	India
*Whether resident of India	
○ No	

*Income-tax PAN/Passport number	
PAN     Page 1 and	
○ Passport number	
*Income-tax PAN/Passport number details	BC*****5J
*Place of Birth (State)	Delhi
*Place of Birth (District)	West Delhi
*Whether citizen of India	
• Yes	
○ No	
*Occupation type (Business/Professional/Government Employment/Private Employment /Housewife/Student/Others)	D. Maria
	Business
Description of others	
*Area of Occupation	Others
If 'Others' selected, please specify	BUSINESSMAN
*Educational Qualification (Primary education/Secondary education Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/ Diploma /Others)	Bachelor's degree
If 'Others' selected, please specify	
*Mobile No	+91******90
*Email ID	sa******il.com
(ii) *Permanent address	
*Address Line I	B-59, GALI NO 23
*Address Line II	MAHAVIR ENCLAVE PART-2
*Country	India
*Pin code / Zip Code	110059
*Area/ Locality	Uttam Nagar
*City	New Delhi
District	West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	UTTAM NAGAR POLICE STATION
Phone (with STD/ISD code)  (iii) * Whether present residential address same as permanent residential address	
Yes	
○ No	
*Present address	
*Address Line I	B-59, GALI NO 23

*Address Line II	MAHAVIR ENCLAVE PART-2
*Country	India
*Pin code / Zip Code	110059
*Area/ Locality	Uttam Nagar
*City	New Delhi
District	West Delhi
*State / UT	Delhi
Jurisdiction of Police Station	UTTAM NAGAR POLICE STATION
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
*If Duration of stay at present address is less than one year then address of previous residence	
(iv) *Identity Proof (Voters Identity Card/Passport/Driving License/Aadhaar)	Aadhaar
*Residential Proof (Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarized Rent Agreement)	Bank Statement
*Identity Proof No.	820976793215
*Residential Proof No.	605710110005360
*Submit a copy of the proof of identity and proof of address *Proof of identity	
Max 2 MB	
*Residential proof	
Max 2 MB	
(v)In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)	
(vi) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	Cash
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	5000
*Monetary value of contribution (in words)	Five Thousand

*Number of LLP(s) in which he/ she is a partner  Number of company(s) in which he/ she is a director  C *Particulars of bodies corporate and their nominees as designated partners having DIN/DPIN (i) *Particulars of body corporate  Type of body corporate  (LIP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)  **Corporate identity number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (ILIPN) or foreign limited liability partnership identification number (FLIPN) or foreign limited liability part		
C * Particulars of bodies corporate and their nominees as designated partners having DIN/DPIN (i) *Particulars of body corporate  *Type of body corporate (ILLP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)  *Corporate identify number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (ILLPIN) or Foreign limited liability partnership identification number (FLLPIN) or any other registration number  PAN  *Name of body corporate  *Registered office address or Principal place of business in India or Principal place of business outside India  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Poscription of contribution  *Form of contribution	*Number of LLP(s) in which he/ she is a partner	o
(i) *Particulars of body corporate  *Type of body corporate  (LIP/Company)Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)  *Corporate identity number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign limited liability partnership identification number (FCRN) or Limited liability partnership iden	*Number of company(s) in which he/ she is a director	p
(LLP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)  **Corporate identity number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign Ilmited liability partnership identification number (FLLPIN) or any other registration number  PAN  **Name of body corporate  **Registered office address or Principal place of business in India or Principal place of business outside India  **Address Line I  **Country  **Pin code / Zip Code  **Area/ Locality  **City  District  **City  District  **State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  **Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) **Description of contribution  *Form of contribution		N/DPIN
liability partnership identification number (LLPIN) or Foreign limited liability partnership identification number (FLLPIN) or any other registration number PAN  *Name of body corporate  *Registered office address or Principal place of business in India or Principal place of business outside India  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station Contact details  Phone (with STD/ISD code)  *Mobile No Fax  *Email ID In case of company seeking conversion  Number of shares held (in INR)  (ii) *Pescription of contribution  *Form of contribution	(LLP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/	
*Name of body corporate  *Registered office address or Principal place of business in India or Principal place of business outside India  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	liability partnership identification number (LLPIN) or Foreign limited liability partnership	
*Registered office address or Principal place of business in India or Principal place of business outside India  *Address Line I  *Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	PAN	
*Address Line II  *Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution	*Registered office address or Principal place of business in India or Principal place of business	outside India
*Country  *Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station Contact details Phone (with STD/ISD code)  *Mobile No Fax  *Email ID In case of company seeking conversion  Number of shares held Paid up value of shares held (in INR) (ii) *Description of contribution		
*Pin code / Zip Code  *Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*Address Line II	
*Area/ Locality  *City  District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*Country	
*City District  *State / UT  Jurisdiction of Police Station Contact details Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID In case of company seeking conversion  Number of shares held Paid up value of shares held (in INR) (ii) *Description of contribution	*Pin code / Zip Code	
District  *State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution	*Area/ Locality	
*State / UT  Jurisdiction of Police Station  Contact details  Phone (with STD/ISD code)  *Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*City	
Jurisdiction of Police Station Contact details Phone (with STD/ISD code)  *Mobile No Fax  *Email ID In case of company seeking conversion  Number of shares held Paid up value of shares held (in INR)  (ii) *Description of contribution	District	
Contact details Phone (with STD/ISD code)  *Mobile No Fax  *Email ID In case of company seeking conversion  Number of shares held Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*State / UT	
*Mobile No  Fax  *Email ID  In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution		
*Email ID In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	Phone (with STD/ISD code)	
*Email ID In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*Mobile No	
In case of company seeking conversion  Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	Fax	
Number of shares held  Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	*Email ID	
Paid up value of shares held (in INR)  (ii) *Description of contribution  *Form of contribution	In case of company seeking conversion	
(ii) *Description of contribution  *Form of contribution	Number of shares held	
	·	
If 'Other than cash' selected, please specify	If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director		

Designated partner Identification number ([	DIN/DPIN)	
Name		
Whether resident of India		
Yes		
No		
Designation and Authority in body corporat	2	
Copy of resolution on the letterhead of such	body corporate to become a partner in the propal a letterhead mentioning the name and address	
Max 2 MB		
D *Particulars of bodies corporate and t (i)* Particulars of body corporate	heir nominees as designated partners not ha	ving DIN/DPIN
*Type of body corporate (LLP/Company/Foreign LLP/ Foreign comp Company incorporated outside India (CIOI		
Corporate identity number (CIN) or foreign ability partnership identification number (LL dentification number (FLLPIN) or any other r		E
PAN		
*Name of body corporate		
*Registered office address or Principal place	e of business in India or Principal place of busin	ess outside India
*Address Line I		
*Address Line II		
*Country		
•		
*Pin code / Zip Code		
*Area/ Locality		
*City		
District		
*State / UT		
Jurisdiction of Police Station		
Contact details		
Phone (with STD/ISD code)		
*Mobile No		
Fax		
*Email ID		
In case of company seeking conversion		,
Number of shares held		
Detailer value (1) 11/1/2 (1972)		,
Paid up value of shares held (in INR)  (ii) *Description of contribution		I

*Form of contribution (Conversion/Cash /Other than cash)	
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director (iii) * Particulars of the person signing on behalf of the body corporate as nominee	
First Name	
Middle Name	
Surname	
Father's First name	
Father's Middle name	
Father's Surname	
*Gender	
( Male/Female/ Transgender)	
*Date of Birth (dd/mm/yyyy)	
*Nationality	
*Whether resident of India	
○ Yes	
○ No	
*Income-tax PAN/Passport number	
○ PAN	
Passport number	
*Income-tax PAN/Passport number details	
*Place of Birth (State)	
*Place (Piul (Piul II)	
*Place of Birth (District)  *Whether citizen of India	
Yes	
○ No	
*Occupation type	
(Business/Professional/Government	
Employment/Private Employment /Housewife/Student/Others)	
Description of others	
*Area of Occupation	
If 'Others' selected, please specify	,
*Educational Qualification	
(Primary education/Secondary education	

Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/	
If 'Others' selected, please specify	
*Mobile No	
*Email ID	
*Permanent address	
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
(iv) * Whether present residential address same as permanent residential address	
· Yes	
○ No	
*Present address	
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	
*If Duration of stay at present address is less than one year then address of previous residence	
(v) *Identity Proof (Voters Identity Card/Passport/Driving License/Aadhaar)	
*Residential Proof (Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarized	

Rent Agreement)	
*Identity Proof No.	
*Residential Proof No.	
*Submit a copy of the proof of identity and proof of address *Proof of identity	
Max 2 MB	
*Residential proof	
Max 2 MB	
*Copy of resolution on the letterhead of such body corporate to authorization of such body corporate also on a letterhead mention nominated to act as nominee/designated partner on its behalf.	become a partner in the proposed LLP and a copy of resolution/ ioning the name and address of an individual
Max 2 MB	
7.Particulars of partners other than designated partners A *Particulars of individual partners having DIN/DPIN (i) *Basic details of Individual partner	
*Designated partner Identification number (DIN/DPIN)	
*Name	
*Whether resident of India	
○ Yes	
○ No	
In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)	
(ii) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director	
B *Particulars of individual partners not having DIN/DPIN (i) *Basic details of individual partner	
First Name	
Middle Name	
Surname	

Father's First name	
Father's Middle name	
Father's Surname	
*Gender ( Male/Female/ Transgender)	
*Date of Birth (dd/mm/yyyy)	
*Nationality *Whether resident of India	
○Yes	
○ No	
*Income-tax PAN/Passport number  PAN	
○ Passport number	
*Income-tax PAN/Passport number details	
*Place of Birth (State)	
*Place of Birth (District)	
*Occupation type (Business/Professional/Government Employment/Private Employment /Housewife/Student/Others)	
Description of others	
*Area of Occupation	
If 'Others' selected, please specify	
*Educational Qualification (Primary education/Secondary education Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/ Diploma /Others)	
If 'Others' selected, please specify	
*Mobile No	
*Email ID	
(ii)*Permanent address	1
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	

District	
*State / UT	
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
(iii) * Whether present residential address same as permanent residential address	
○ Yes	
○ No	
*Present address	
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	,
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
*If Duration of stay at present address is less than one year then address of previous residence	
(iv) *Identity Proof	
(Voters Identity Card/Passport/Driving License/Aadhaar)	
*Residential Proof	
(Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notarized rent Agreement)	
*Identity Proof No.	
*Residential Proof No.	
*Submit a copy of the proof of identity and proof of address *Proof of identity	
Max 2 MB	
*Residential proof	
Max 2 MB	
(v) In case of company seeking conversion	
Number of shares held	

Paid up value of shares held (in INR)	
(vi) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director	
C *Particulars of bodies corporate and their nominees as partners having DIN/DPIN (i)* Particulars of body corporate	
*Type of body corporate (LLP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)	
*Corporate identity number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign limited liability partnership identification number (FLLPIN) or any other registration number	d
PAN	
*Name of body corporate	
*Registered office address or Principal place of business in India or Principal place of business	outside India
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	
Jurisdiction of Police Station Contact details	
Phone (with STD/ISD code)	
*Mobile No	
Fax	
*Email ID	
In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)  (ii) *Description of contribution	

*Form of contribution (Conversion/Cash /Other than cash)	
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director	
(iii) *Particulars of the person /designated partner signing on behalf of the body corpor	ate as nominee
*Designated partner Identification number (DIN/DPIN)	
*Name	
*Whether resident of India  (**Yes**) Yes**	
O No	
*Designation and Authority in body corporate  *Copy of resolution on the letterhead of such body corporate to become a partner in the propauthorization of such body corporate also on a letterhead mentioning the name and address nominated to act as nominee/designated partner on its behalf.	
Max 2 MB  D *Particulars of bodies corporate and their nominees as designated partners not havin (i)* Particulars of body corporate	g DIN/DPIN
*Type of body corporate (LLP/Company/Foreign LLP/ Foreign company/LLP incorporated outside India (LIOI)/ Company incorporated outside India (CIOI)	
*Corporate identity number (CIN) or foreign Company registration number (FCRN) or Limited liability partnership identification number (LLPIN) or Foreign limited liability partnership identification number (FLLPIN) or any other registration number	k
PAN	
*Name of body corporate	
*Registered office address or Principal place of business in India or Principal place of business	outside India
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*Area/ Locality *City	
*City	

Contact details	
Phone (with STD/ISD code)	
*Mobile No	
Fax	
*Email ID	
In case of company seeking conversion	
Number of shares held	
Paid up value of shares held (in INR)  (ii) *Description of contribution	
*Form of contribution (Conversion/Cash /Other than cash)	
If 'Other than cash' selected, please specify	
*Monetary value of contribution (in INR.) (in figures)	
*Monetary value of contribution (in words)	
*Number of LLP(s) in which he/ she is a partner	
*Number of company(s) in which he/ she is a director (iii) *Particulars of the person signing on behalf of the body corporate as nominee	
First Name	
Middle Name	
Surname	
Father's First name	
Father's Middle name	
Father's Surname	
*Gender ( Male/Female/ Transgender)	
*Date of Birth (dd/mm/yyyy)	
*Nationality  *Whether resident of India	
whether resident of india	
Yes	
○ No	
*Income-tax PAN/Passport number  PAN	
C Passport number	
*Income-tax PAN/Passport number details	
*Place of Birth (State)	
*Place of Birth (District)	
*Occupation type (Business/Professional/Government	

Employment/Private Employment /Housewife/Student/Others)	
Description of others	
*Area of Occupation	
If 'Others' selected, please specify	
*Educational Qualification	
(Primary education/Secondary education Vocational qualification/Bachelor's degree/Master degree/Doctorate or higher/Professional/ Diploma /Others)	
If 'Others' selected, please specify	
*Mobile No	
*Email ID	
*Permanent address	
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
(iv) * Whether present residential address same as permanent residential address	
○Yes	
○ No	
*Present address	
*Address Line I	
*Address Line II	
*Country	
*Pin code / Zip Code	
*Area/ Locality	
*City	
District	
*State / UT	
Jurisdiction of Police Station	
Phone (with STD/ISD code)	
Duration of stay at present address (Years/Month)	

If Duration of stay at present address is less than one year then address of previous	
esidence	
<b>v)</b> *Identity Proof Voters Identity Card/Passport/Driving License/Aadhaar)	
Residential Proof Bank Statement/Electricity Bill/Telephone bill/Mobile bill/Utility Bill/Registered/Notariz ent Agreement)	red
Identity Proof No.	
Residential Proof No.	
Submit a copy of the proof of identity and proof of address Proof of identity	
Max 2 MB	
Residential proof	
Max 2 MB	
Copy of resolution on the letterhead of such body corporate to become a partner in the uthorization of such body corporate also on a letterhead mentioning the name and additional actions are made and additional to act as nominee/designated partner on its behalf.	
Max 2 MB	
Fotal monetary value of contribution by partners in the LLP (in figures)	20000
Total monetary value of contribution by partners in the LLP (in figures)  Total monetary value of contribution by partners in the LLP (in `) (in words)	20000 Twenty Thousand
Total monetary value of contribution by partners in the LLP (in `) (in words)  P.PAN/ TAN Information  Additional Information for applying Permanent Account Number (PAN) and Tax D	Twenty Thousand
Total monetary value of contribution by partners in the LLP (in `) (in words)  PAN/ TAN Information  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)	Twenty Thousand
Total monetary value of contribution by partners in the LLP (in `) (in words)  PAN/ TAN Information  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Area code	Twenty Thousand  Deduction Account Number (TAN)
Total monetary value of contribution by partners in the LLP (in `) (in words)  P.PAN/ TAN Information  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)	Twenty Thousand  Deduction Account Number (TAN)  DEL
Total monetary value of contribution by partners in the LLP (in `) (in words)  P.PAN/ TAN Information  Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Area code  AO type  Range code	Twenty Thousand  Deduction Account Number (TAN)  DEL  W
PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax Description in the Count Number (PAN) and Tax Description in the	Twenty Thousand  Deduction Account Number (TAN)  DEL  W  32
PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Area code AO type Range code AO No. Information specific to TAN	Twenty Thousand  Deduction Account Number (TAN)  DEL  W  32
PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax Description in the Count Number (PAN) and Tax Description in the	Twenty Thousand  Deduction Account Number (TAN)  DEL  W  32
PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax Description in the Count Number (PAN) and Tax Description in the	Deduction Account Number (TAN)  DEL  W  32  3  DEL
PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax Description in the LLP (in `) (in words)  Area code AO type Range code AO No. Information specific to TAN Area code AO type Range code AO type Range code	Twenty Thousand  Deduction Account Number (TAN)  DEL  W  32  3  DEL  W
	Twenty Thousand  Deduction Account Number (TAN)  DEL  W  32  3  DEL  W  79
D.PAN/ TAN Information Additional Information for applying Permanent Account Number (PAN) and Tax D. Information specific to PAN Farea code FAO type FRange code FAO No. Information specific to TAN Farea code FAO No. Source of Income Income from Business/profession/ Capital Gains /Income from house property	Deduction Account Number (TAN)  DEL  W  32  3  DEL  W  79  3

Max 2 MB	
(b)Optional attachment(s) - if any	
Max 2 MB	

## \*Consent by Designated partners/Partners

We, the several partners whose names are subscribed below, are desirous of being formed into a LLP for carrying on a lawful business with a view to earn profit and have entered or agreed to enter into a LLP agreement in writing.

We respectively agree to contribute money or other property or other benefit or to perform services for the LLP in accordance with the LLP agreement, the particulars of which are stated against our respective names.

We hereby give our consent to become a partner/ designated partner/ nominee/ nominee & designated partner of the LLP pursuant to section 7(4) / 25(3)(c) of the Limited Liability Partnership Act, 2008. (format as an attachment)

To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete. I further confirm that the proposed name is not undesirable, identical or too nearly resembles to that of any other partnership firm or limited

liability partnership or body corporate or a registered trade mark or a trade mark which is subject of an application for registration of any other person under the Trade Marks Act, 1999.

\*Subscribers' sheet including consent.

Max 2 MB

**Part B: Statement** 

**Declaration by designated partner** 

* To be digitally signed by a designated partner	SANJEEV Oplaily signed by KUMAR - SANLEEV SUMAN - SOUR 2024 OF CE SUMAN C		
*Signature Field 1			
*DIN/DPIN/PAN of the designated partner	BC****5J		
Declaration and certification by professional			
I KRISHAN KUMAR ● Son / ○ Daughter of	RAJESH KUMAR do state that I am*		
○ Advocate	Company Secretary in whole time practice		
Chartered Accountant in whole time practice     Cost Accountant in whole time practice			
engaged in the formation of the limited liability partnership and my membership number or certificate of practice number			
with Institute of Chartered Accountants of India (Name of	regulatory body) is ***** (certificate of practice		
number in case of company secretary /membership in all the cases)			
(ii) all the requirements of the Limited Liability Partnership Act, 2008 and the rules made thereunder have been complied with, in respect of incorporation and matters precedent and incidental thereto;			
(iii) I make this statement conscientiously believing the same to be true.			
* Whether:			
○ Associate <b>⑤</b> Fellow			
*Signature Field 2	KRISHAN Opposity regiment by extension of the control of the contr		
I, the designated partner of the LLP do state that (i) am a person named in the incorporation document as a desig (ii) the designated partner(s)/partner(s) have given their prior co (iii) all the requirements of the Limited Liability Partnership Act, and Identification Number (DIN/DPIN), registration of the LLP and make this statement conscientiously believing the same to	nsent to act as designated partner(s)/partner(s); 2008 and the rules made thereunder in respect of Designated Partner atters precedent or incidental thereto have been complied with;		

For office use only:	
eForm Service request number (SRN)	
eForm filing date (dd/mm/yyyy)	
Digital signature of the authorizing officer	
This e-form is hereby approved	DSC Box
This e-form is hereby rejected	DSC Box
Date of signing (dd/mm/yyyy)	
Duration of stay at present address (Years/Month)	