

**Form No. 3**  
**[See clause (a) of sub-rule (2) of rule 7]**

1. LLPIN \_\_\_\_\_

2. Name of the Limited Liability Partnership \_\_\_\_\_

3. Full address of the registered office of the Limited Liability Partnership

Line 1 \_\_\_\_\_

Line 2 \_\_\_\_\_

City \_\_\_\_\_

District \_\_\_\_\_

State \_\_\_\_\_

PIN Code \_\_\_\_\_

Country \_\_\_\_\_

4. Date of passing resolution \_\_\_\_\_

5. Date of declaration made on \_\_\_\_\_

6. Declaration and statement in Form 2 and 4 and valuer report are attached -

Yes

List of attachments

(1) Copy of the declaration ,  
statement & valuation report.

(2) Copy of the Authority

(3) Optional attachment.

**Verification**

To the best of our knowledge and belief, the information given in this form and its attachments is correct and complete.

I have gone through the provisions of the Limited Liability Partnership Act, 2008, the rules framed there under.

I have been authorized to sign and submit this application.

To be digitally signed by designated partner \_\_\_\_\_

DPIN

Dated: \_\_\_\_\_

Place: \_\_\_\_\_