

FILE COPY



**CERTIFICATE OF INCORPORATION
OF A
LIMITED LIABILITY PARTNERSHIP**

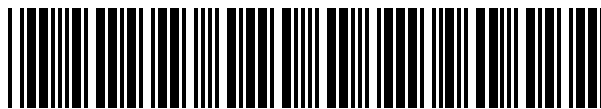
Partnership No. **OC450710**

The Registrar of Companies for England and Wales, hereby certifies that

NPM HQ LLP

is this day incorporated under the Limited Liability Partnerships Act 2000 as a limited liability partnership, that the partnership is limited, and the situation of its registered office is in Wales

Given at Companies House, Cardiff, on **19th January 2024**



NOC4507104



Companies House



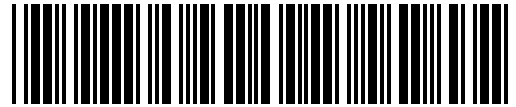
**THE OFFICIAL SEAL OF THE
REGISTRAR OF COMPANIES**



Companies House

LLIN01(ef)

Application to register an LLP



Received for filing in Electronic Format on the: **18/01/2024**

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LLP name in full: **NPM HQ LLP**

Company Type: **Limited Liability Partnership**

*Situation of
Registered Office:* **Wales**

*Proposed Registered
Office Address:* **VALE CROSSFIT, 155 HOLTON ROAD
BARRY
BARRY
VALE OF GLAMORGAN
WALES CF63 4HP**

At least two members named must be designated

LLP Members

Type: **Corporate**

Name: **VALE CF LIMITED**

Registered or principal address: **VALE CROSSFIT, 155 HOLTON ROAD
BARRY
VALE OF GLAMORGAN
WALES CF63 4HP**

UK LLP

Registration Number: **13741977**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Type: **Person**

Full Forename(s): **LAUREN SARAH**

Surname: **SCHROPFER**

Former Names:

Country/State Usually Resident: **WALES**

Date of Birth: ****/01/1990**

Service Address: **recorded as Company's registered office**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Type: **Person**

Full Forename(s): **HANNAH ELIZABETH JOYCE**

Surname: **LAYTON**

Former Names:

Country/State Usually Resident: **WALES**

Date of Birth: ****/03/1994**

Service Address: **recorded as Company's registered office**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Type: **Person**

Full Forename(s): **NICOLE**

Surname: **HAGAN**

Former Names:

Country/State Usually Resident: **WALES**

Date of Birth: ****/08/1995**

Service Address: **recorded as Company's registered office**

Appointment is for a Designated Member

The members confirm that the person named has consented to act as a designated member

Persons with Significant Control (PSC)

Statement of no PSC

The limited liability partnership knows or has reason to believe that there will be no registerable Person with Significant Control or Relevant Legal Entity (RLE) in relation to the LLP

Statement of Compliance

I confirm the requirements of the Companies Act 2006 as to registration have been complied with.

Authorisation

Authoriser Designation: **member**

Authenticated **YES**
