



## LLP Form No. 3

Form language

English  Hindi

Information with regard to Limited Liability Partnership Agreement  
and changes, if any, made therein

[Pursuant to rule 21(1) of Limited Liability Partnership Rules, 2009]

Refer instruction kit for filing the form

All fields marked in \* are mandatory

1 \*Form filed for

Filing information with regard to initial LLP Agreement

For information with regard to changes in LLP Agreement

2 \*Limited Liability Partnership identification number (LLPIN)

(a) \*Name of the Limited Liability Partnership(LLP)

(b) \*Address of the registered office of the LLP

(c) \*Jurisdiction of Police Station

(d) \*e-mail ID

### Information with regard to initial LLP Agreement

3 (a) Place at which the initial Agreement was made

State

District

(b) Date of Agreement (DD/MM/YYYY)

(c) Date of Ratification, in case initial Agreement was made prior to incorporation  
(DD/MM/YYYY)

4 Business activities to be carried on by LLP on incorporation

### 5 Obligation to contribute

(i) Total Number of partners as on the date of filing the Form

(ii) Details of each partner to contribute money or property or other benefit or to perform services and their profit sharing ratio

S.No.	DPIN/Income tax PAN/Passport number of the partner/nominee	Details of DIN/Income tax PAN/Passport number	Name of Individual Partner/Nominee of Body Corporate	Type of Body Corporate	LLPIN/CIN/FCRN/FLLPIN/Other Identification Number	Details of LLPIN/CIN/FCRN/FLLPIN/Other Identification Number	Name of Body Corporate	Designation (Partner/Designated Partner)	Form of contribution	Monetary value of contribution	% of Profit sharing	
			(iii) Total Monetary value of partners' contribution in the LLP (in figures) (INR)								0	

6 Mutual Rights and Duties of Partners

7 Restrictions, if any, on the partners' authority

8 Management and Administration of LLP

(a) Acts, matters or things, if any, which can be done only with the consent of all the partners/consent of requisite number or percentage of partners

(b) Procedure for calling, holding and conducting meetings, (where the decisions are to be made at meetings of partners)

9 Details of indemnity clause, if any.

10 Details of agreement relating to:

(a) Admission of a new partner

(b) Retirement of a partner

(c) Cessation of a partner

(d) Expulsion of a partner

(e) Resignation of a partner

11 Clause relating to resolution of disputes

(a) Between the partners

(b) Between the partner and the LLP

12 Information relating to duration of LLP, if any

13 Information relating to voluntary winding up

14 Information of clauses in the agreement:

(a) relating to rule 16 (2)

(b) relating to rule 17 (1)

(c) relating to rule 20 (1)

(d) relating to rule 24(18) (a)

15 Any other information or clause relating to the LLP Agreement not covered above (optional)

**Information with regard to changes (addition, omission or alteration) in the LLP Agreement**

16 Date of modification of the agreement (DD/MM/YYYY)

(a) Number of amendments/changes made in LLP agreement till date

(b) SRN of Form 4 or Form 5 of last one year from the date of filing this form through which notice of change/amendment in the LLP agreement has been filed with the Registrar

Sr. No.	SRN
<input type="checkbox"/>	
<input type="checkbox"/>	

Add row

Delete row

17 Whether change in agreement is on account of

- Change in business activities
- Change in partner(s)
- Change in partner's contribution and % of profit sharing
- Change due to other reasons

Specify the other change to LLP agreements

- Mutual Rights and Duties of Partners
- Restrictions, if any, on the partners' authority
- Acts, matters or things, if any, which can be done only with the consent of all the partners/consent of requisite number or percentage of partners
- Procedure for calling, holding and conducting meetings, (where the decisions are to be made at meetings of partners)
- Details of indemnity clause, if any
- Details of agreement relating to - Admission of a new partner

- Details of agreement relating to - Retirement of a partner
- Details of agreement relating to - Cessation of a partner
- Details of agreement relating to - Expulsion of a partner
- Details of agreement relating to - Resignation of a partner
- Clause relating to resolution of disputes - Between the partners
- Clause relating to resolution of disputes – Between the partners and the LLP
- Information relating to duration of LLP, if any
- Information relating to voluntary winding up
- Information of clauses in the agreement relating to rule 16 (2)
- Information of clauses in the agreement relating to rule 17 (1)
- Information of clauses in the agreement relating to rule 20 (1)
- Information of clauses in the agreement relating to rule 24(18) (a)
- Any other information or clause relating to the LLP Agreement not covered above (optional)

18 Details of change in business activity

(a) Based on new/ changed business activities, search and select industry sub class (as per NIC codes 2008)

 

Primary

<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>
<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>
<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

(b) Description of industrial activities to be carried out by the LLP

Main industrial activity

- NIC Code

- Description of NIC code

Other industrial activity

- NIC Code

- Description of NIC code

(c) Description of business activities, after change

(d) Do change in business activities require change in name of the LLP

Yes

No

19 (a) Details of each partners' obligation to contribute money or property or other benefit or to perform services and their profit-sharing ratio, after change in LLP agreement and Details of designated partners and partner appointed

S. No.	Whether Body Corporate Partner (Yes / No)	DPIN/Income-tax PAN/P assport number of the partner/nominee	Details of DIN/Income tax PAN/Passport number	Name of Individual Partner/ Nominee of Body Corporate	Type of Body Corporate	LLPIN/ CIN/ FCRN/ FLLPIN/ Other Identification Number	Details of LLPIN/ CIN/ FCRN/ FLLPIN/ Other Identification Number	Name of Body Corporate	Designation (Partner/ Designated Partner)	Form of contribution (Conversion/Cash/ Other than cash)	Monetary value of contribution	% of Profit sharing	Type of change (Addition/Deletion/Change/No Change)

(b) (i) Total number of existing designated partners and partners prior to change

(ii) Total number of designated partners and partners appointed

(iii) Total number of designated partners and partners removed

(iv) Total number of designated partners and partners after the change

(c) Total monetary value of contribution, after changes (in figures) (INR)

(i) Existing

(ii) Addition

(iii) Reduction

(iv) Total (i+ii-iii)

(v) Total (in words)

20 Change due to other reasons

(a) Mutual Rights and Duties of Partners

(b) Restrictions, if any, on the partners' authority

- (c) Acts, matters or things, if any, which can be done only with the consent of all the partners/consent of requisite number or percentage of partners
  
- (d) Procedure for calling, holding and conducting meetings, (where the decisions are to be made at meetings of partners)
  
- (e) Details of indemnity clause, if any
  
- (f) Details of agreement relating to - Admission of a new partner
  
- (g) Details of agreement relating to - Retirement of a partner
  
- (h) Details of agreement relating to - Cessation of a partner
  
- (i) Details of agreement relating to - Expulsion of a partner
  
- (j) Details of agreement relating to - Resignation of a partner
  
- (k) Clause relating to resolution of disputes - Between the partners
  
- (l) Clause relating to resolution of disputes - Between the partner and the LLP
  
- (m) Information relating to duration of LLP, if any
  
- (n) Information relating to voluntary winding up
  
- (o) Information of clauses in the agreement relating to rule 16 (2)
  
- (p) Information of clauses in the agreement relating to rule 17 (1)
  
- (q) Information of clauses in the agreement relating to rule 20 (1)
  
- (r) Information of clauses in the agreement relating to rule 24(18) (a)
  
- (s) Any other information or clause relating to the LLP Agreement not covered above (optional)

**Attachments**

(a) Initial LLP Agreement

Initial LLP	Choose File	Remove	Download
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(b) Supplementary/ amended LLP agreement containing changes

Supplementary	Choose File	Remove	Download
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(c) Optional attachment(s) - if any

Optional	Choose File	Remove	Download
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**Statement**

\*I the designated partner of the LLP do state that

- (i) I am a person named in the Incorporation Document as a designated Partner / I am a designated Partner of the LLP;
- (ii) the particulars given above are in accordance with the initial LLP agreement /subsequent agreement relating to change in the LLP agreement;
- (iii) the original copy of LLP Agreement will be produced whenever called for;
- (iv) in case of change in contribution, the fees payable to Registrar have been/are being paid;
- (v) I make this statement conscientiously believing the same to be true.
- (vi) I am authorized to sign this form.

\* To be digitally signed by a designated partner:

DSC BOX

\*DIN/DPIN of the designated partner

**Certificate**

\*It is hereby certified that I have verified the above particulars from the books and records of \*

and found them to be true and correct.

\*I further certify that all the required attachment(s) have been completely attached in this form.

- Chartered Accountant (in whole-time practice) or
- Cost Accountant (in whole-time practice) or
- Company Secretary (in whole-time practice)

\* Whether associate or fellow:

- Associate
- Fellow

\* DSC Box

DSC BOX

\* Membership number or certificate of practice number

Save

Submit

**This eForm has been taken on file maintained by the registrar of companies through electronic mode and on the basis of statement of correctness given by the filing LLP.**

**For office use only:**

eForm Service request number (SRN)

eForm filing date (DD/MM/YYYY)



Or

**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 registered

Date of signing (DD/MM/YYYY)



## LLP Form No.4

Form language



सत्यमेव जयते

**Notice of appointment, cessation, change in name/ address/designation of a designated partner or partner and consent to become a partner/designated partner**

English

Hindi

[Pursuant to rule 8, 10(3), 22(2) and 22(3) of Limited Liability Partnership Rules, 2009]

Refer instruction kit for filing the form

All fields marked in \* are mandatory.

1(a) \*Limited Liability Partnership identification number (LLPIN)

(b) \*Name of the Limited Liability Partnership (LLP)

(c) \*Address of the registered office of the LLP

(d) \*Email ID

2 (a) \*Number of individual designated partner(s) for which this form is being filed

(b) \*Number of bodies corporate and their Nominees as designated partners for which this form is being filed

(c) \*Number of individual partner(s) for which this form is being filed

(d) \*Number of bodies corporate as partners and their nominees for which this form is being filed

(e) \*Total number of partner(s)/ designated partner(s) for which the form is being filed.

3 Details of individual designated partner(s) for which this form is being filed

(a) The form is being filed for

Appointment

Cessation

Change in designation

(b) Date of Event (dd/mm/yyyy)

(c) Changed designation (Category)

(d) In case of change in designation to Designated Partner, DPIN/ Income-tax PAN/ Passport number of partner

(e) Designated partner identification number (DPIN)

(f) Name

(g) Whether resident of India

Yes  No

(h) Number of LLP(s) in which he/she is a partner

(i) Number of company(s) in which he/she is a director

#### 4 Details of bodies corporate and their nominees as designated partners for which this form is being filed

(a) The form is being filed for

- Appointment       Cessation       Change in Designation       Change in Nominee  
 Change in address of body corporate       Change in name of body corporate

(b) Date of Event (dd/mm/yyyy)

(c) Type of body corporate

*(LLP/ Foreign LLP/ Company/ Foreign Company/ LLP incorporated outside India (LLOI)/ Company incorporated outside India (CLOI))*

(d) Corporate identification 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 identification number

(e) Name of body corporate

Proof of change in Name of body corporate

   

(f) Country where registered

(g) Full address of registered office or principal place of business in India

Address Line I

Address Line II

Country

Pin code

Area/Locality

City

District

State/UT

Jurisdiction of Police Station

Proof of change in address of body corporate

File as PDF

Choose File

Remove

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(h) Phone

(i) E-mail ID

(j) Previous name, address of the body corporate

**Name and particulars of the person signing on behalf of the body corporate as nominee**

(k) DPIN

(l) Name

(m) Whether resident of India

Yes  No

(n) Designation & Authority in body corporate

(o) Changed designation (Category)

(p) DPIN/ PAN/ Passport number of the previous nominee

(q) Name of the previous nominee

**5 Details of individual partner(s) for which this form is being filed**

(a) The form is being filed for

- Appointment  Cessation  Change in Name of Partner  
 Change in designation  Change in address

\*In case user is having DIN/DPIN then file DIR-6 for any changes in name/Address. For all other partners, file the changes through Form 4

(b) Date of Event (dd/mm/yyyy)

(c)  Income tax permanent account number (Income-tax PAN)

Passport Number

DPIN

(d) Income tax permanent account number (Income-tax PAN) or Passport Number or DPIN

Verify income-tax PAN/ Pre-Fill

(e) Name of partner

First name

Middle name

Last name

Proof of change in Name of partner

Choose File

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(f) Father's Name

First name

Middle name

Last name

(g) Permanent Residential Address

Address Line I

Address Line II

Country

Pin Code/Zip Code

Area/Locality

City

District

State/UT

Jurisdiction of Police Station

Proof of change in permanent residential address

Choose File

Remove

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(h) Whether present residential address is same as the permanent residential address

Yes

No

(i) If no, present residential address

Address Line I

Address Line II

Country

Pin Code/Zip Code

Area/Locality

City

District

State/UT

Jurisdiction of Police Station

Proof of change in present residential address

Choose File

Remove

Download

(j) Phone

(k) Mobile

(l) Email ID

(m) Previous name/ previous address

(n) Whether resident in India

Yes

No

(o) Nationality

(p) Date of Birth (dd/mm/yyyy)

(q)(i) Occupation type

*(Self Employed/ Professional/ Homemaker/ Student/ Serviceman)*

(q)(ii) Area of occupation

*(Government/ Teaching/ Others)*

(q)(iii) If 'others' selected, please specify

(r) Changed designation (Category)

(s) Number of LLP(s) in which he/she is a partner

(t) Number of company(s) in which he/she is a director

## 6 Details of bodies corporate as partners and their nominees for which this form is being filed

(a)\*The form is being filed for

- Appointment     Cessation     Change in Nominee     Change in Designation
- Change in address of body corporate     Change in name of nominee     Change in name of body corporate
- Change in address of nominee

(b) Date of Event (dd/mm/yyyy)

(c) Type of body corporate

*(LLP/ Foreign LLP/ Company/ Foreign Company/ LLP incorporated outside India (LLOI)/ Company incorporated outside India (CLOI/ Others)*

(d) CIN or FCRN or LLPIN or FLLPIN or any other identification number

(e) Name of body corporate

Proof of change in name of body corporate

Choose File

Remove

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(f) Country where registered

(g) Full address of registered office

Address Line I

Address Line II

Country

Pin Code/Zip Code

Area/Locality

City

District

State/UT

Jurisdiction of Police Station

Proof of change in address of body corporate

Choose File

Remove

Download

(h) Phone

(i) Email ID

(j) Previous name/ previous address

(k) Name and particulars of the person signing on behalf of the body corporate as nominee

(l)\*  Income tax permanent account number (Income-tax PAN)

Passport Number

DPIN

(m) Income tax permanent account number (Income-tax PAN) or Passport Number  
or DPIN

## (n) Name of Nominee

First name

Middle name

Last name

Proof of change in Name of Nominee

Max 2 MB

Choose File

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## (o) Father's Name

First name

Middle name

Last name

## (p) Permanent Residential Address

Address Line I

Address Line II

Country

Pin Code/Zip Code

Area/Locality

City

District

State/UT

Jurisdiction of Police Station

Proof of change in address of nominee

Max 2 MB

Choose File

Remove

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(q) Whether present residential address is same as the permanent residential address

Yes

No

(r) If no, present residential address

Address Line I

Address Line II

Country

Pin Code/Zip Code



Area/Locality	<input type="text"/>
City	<input type="text"/>
District	<input type="text"/>
State/UT	<input type="text"/>
Jurisdiction of Police Station	<input type="text"/>
Proof of change in address of Nominee	<input type="text"/> <input type="button" value="Choose File"/> <input type="button" value="Remove"/> <input type="button" value="Download"/>
(s) Phone	<input type="text"/>
(t) Mobile	<input type="text"/>
(u) Email ID	<input type="text"/>
(v) Previous name/ previous address	<input type="text"/>
(w) Whether resident in India	<input type="radio"/> Yes <input type="radio"/> No
(x) Nationality	<input type="text"/>
(y) Date of Birth (dd/mm/yyyy)	<input type="text"/>
(z)(i) Occupation type <i>(Self Employed/ Professional/ Homemaker/ Student/ Serviceman)</i>	<input type="text"/>
(z)(ii) Area of occupation <i>(Government/ Teaching/ Others)</i>	<input type="text"/>
(z)(iii) If 'others' selected, please specify	<input type="text"/>
(aa) Designation & Authority in body corporate	<input type="text"/>
(ab) Changed designation (Category)	<input type="text"/>
(ac) Income-tax PAN/ passport number/ DPIN of the previous nominee	<input type="text"/>
(ad) Name of the previous nominee	<input type="text"/>

**Attachments**

(a) Consent to become a partner/ designated partner	<input type="text"/> <input type="button" value="Choose File"/> <input type="button" value="Remove"/> <input type="button" value="Download"/>
(b) Related Entity Details	<input type="text"/> <input type="button" value="Choose File"/> <input type="button" value="Remove"/> <input type="button" value="Download"/>
(c) Evidence of cessation	<input type="text"/> <input type="button" value="Choose File"/> <input type="button" value="Remove"/> <input type="button" value="Download"/>
(d) Where the appointed partner is a body corporate, copy of resolution on the letterhead of such body corporate to become a partner in the proposed LLP and a copy of resolution/ authorization of	<input type="text"/> <input type="button" value="Choose File"/> <input type="button" value="Remove"/> <input type="button" value="Download"/>

such body corporate also on letterhead mentioning the name and address of an individual nominated to act as nominee/ designated partner on its behalf.

(e) Optional attachment (if any)

**Statement**

- \*  To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete
- \*  I, being a designated partner of the LLP, am authorised to sign and submit this form

\*To be digitally signed by a designated partner

\* DPIN of the Designated Partner

**Certificate by practicing professional**

\* It is hereby certified that I have verified the above particulars (including attachment(s)) from the records of

and found them to be true and correct. I further certify that all the required attachment(s) have been completely attached to this form.

\* Category

- Chartered accountant (in whole time practice)
- Cost accountant (in whole time practice)
- Company secretary (in whole-time practice)

\* Whether associate or fellow:

- Associate
- Fellow

\*Membership number or certificate of practice number

\*Signature Field 2

This eForm has been taken on file maintained by the registrar through electronic mode and on the basis of statement of correctness given by the filing LLP.

*For office use only:*

eForm Service request number (SRN)