

LLP FORM NO. 2

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

Incorporation Document and
Subscriber's Statement

Note – All fields marked in * are to be mandatorily filled.

Part A: Incorporation document

1. *Indicate Registrar's reference number for name approval

(Service Request Number (SRN) of Form 1)

2. Name of Limited Liability Partnership (LLP)

3. State in which the registered office of the LLP is to be situated

4. Name of the office of Registrar in which the proposed LLP is to be registered

5. * Address of registered office of the LLP

*Line I

Line II

*City

*District

State

*PIN Code

Country

ISO country code

*Phone

Fax

*e-mail ID

6. Business activities to be carried out by the LLP on incorporation

(Note: In case business activities consists of banking, insurance, venture capital, mutual fund, stock exchange, asset management, architect, architecture, merchant banking, securitization and reconstruction, chit fund and non banking financial activities, a copy of the in-principle approval of the regulatory authority should be attached)

7. * Based on business activities, main division of industrial activity of the LLP as per NIC-2004

Description of main division of industrial activity

8 (a). * Total number of designated partners

(b). * Total number of partners

9. *Number of individual designated partner(s) for which this form is being filed

Details in respect of individuals as designated partners

(a) *Designated partner identification number (DPIN)

(b) Name

(c) Father's Name

(d) Nationality

(e) Whether resident of India ☐ Yes ☐ No

(f) Date of Birth (DD/MM/YYYY)

(g) *Occupation

(h) Present residential address

(i) In case of company seeking conversion

(i) Number of shares held

(ii) Paid up value of shares held (in `)

(j) *Form of contribution

(k) *Monetary value of contribution (in `)

(in words)

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

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

10. *Number of bodies corporate as designated partner(s) for which this form is being filed

Details in respect of bodies corporate as designated partners and their nominees

(a) *Type of body corporate

(b) *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 identification number

(c) *Name of body corporate

(d) *Country where registered

(e) *Full address of the registered office or principal place of business in India

ISO country code Phone Fax

* e-mail ID

(f) In case of company seeking conversion

(i) Number of shares held (ii) Paid up value of shares held (in `)

(g) *Form of contribution

(h) *Monetary value of contribution (in `)
(in words)

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

(i) *DPIN

(ii) Name

(iii) Father's Name

(iv) Present residential address

(v) Nationality

(vi) Whether resident of India ☐ Yes ☐ No

(vii) Date of Birth (DD/MM/YYYY)

(viii) *Occupation

(ix) *Designation & Authority in body corporate

11. *Number of individual partner(s) for which this form is being filed

Details in respect of individuals as partners

(a) * ☐ Income tax permanent account number
(Income-tax PAN) or ☐ Passport number or ☐ DPIN

(b) *Name of partner

(c) *Father's Name

(d) *Nationality

(e) *Whether resident in India ☐ Yes ☐ No

(f) *Date of Birth

(DD/MM/YYYY)

(g) *Occupation

(h) *Permanent Residential Address

*Line I

Line II

*City

*District

*State

*Pin code

ISO country code

*Country

(i) *Whether present residential address is same as the permanent residential address

☐ Yes ☐ No

(j) *If no, present residential address:

*Line I

Line II

*City

*District

*State

*Pin code

*Country

ISO country code

Phone

Fax

Mobile

*e-mail ID

(k) In case of company seeking conversion

(i) Number of shares held

(ii) Paid up value of shares held (in `)

(l) *Form of contribution

(m) *Monetary value of
contribution (in `)

(in words)

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

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

12. *Number of bodies corporate as partner(s) for which this form is being filed

Details in respect of bodies corporate as partners and their nominees

(a) *Type of body corporate	<input type="text"/>				
(b) *CIN or FCRN or LLPIN or FLLPIN or any other identification number	<input type="text"/>				
(c) *Name of body corporate	<input type="text"/>				
(d) *Country where registered	<input type="text"/>				
(e) *Full address of registered office or principal place of business in India	<input type="text"/>				
ISO country code	<input type="text"/>	Phone	<input type="text"/>	Fax	<input type="text"/>
*e-mail ID	<input type="text"/>				
(f) In case of company seeking conversion					
(a) Number of shares held	<input type="text"/>	(b) Paid up value of shares held (in `)	<input type="text"/>		
(g) *Form of contribution	<input type="text"/>				
(h) *Monetary value of contribution (in `)	<input type="text"/>				
(in words)	<input type="text"/>				
(i) Name and particulars of the person signing on behalf of the body corporate as nominee					
(i) * <input type="radio"/> Income-tax PAN or <input type="radio"/> Passport number or <input type="radio"/> DPIN	<input type="text"/>				
(ii) *Name of partner	<input type="text"/>				
(iii) *Father's Name	<input type="text"/>				
(iv) *Nationality	<input type="text"/>	(v) *Whether resident in India	<input type="radio"/> Yes	<input type="radio"/> No	
(vi) *Date of Birth	<input type="text"/>	(DD/MM/YYYY)			
(vii) *Occupation	<input type="text"/>				
(viii) *Designation & Authority in body corporate	<input type="text"/>				
(ix) *Permanent residential address	*Line I	<input type="text"/>			
	Line II	<input type="text"/>			
*City	<input type="text"/>	*District	<input type="text"/>		
*State	<input type="text"/>	*Pin code	<input type="text"/>	ISO country code	<input type="text"/>
*Country	<input type="text"/>				
(x) *Whether present residential address is same as the permanent residential address <input type="radio"/> Yes <input type="radio"/> No					
(xi) *If no, present address	*Line I	<input type="text"/>			
	Line II	<input type="text"/>			
*City	<input type="text"/>	*District	<input type="text"/>		
*State	<input type="text"/>	*Pin code	<input type="text"/>	ISO country code	<input type="text"/>
*Country	<input type="text"/>				
Phone	<input type="text"/>	Fax	<input type="text"/>	Mobile	<input type="text"/>
*e-mail ID	<input type="text"/>				

13. *Total monetary value of contribution by partners in the LLP

(in `) (in figures)

(in words)

14. *Whether addendum to eForm 2 is required to be filed (refer instruction kit for details)

☐ Yes ☐ No

15. 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.

(Attach details in respect of names of partners/ nominees/ witnesses and their signatures in the below format as Subscribers' sheet attachment)

Name of each partner/ designated partner/ nominee/ nominee & designated partner	Designation (Designated Partner / Partner/ nominee/ nominee & designated partner)	Signature of partner/ designated partner/ nominee/ nominee & designated partner	Name, address and profession (along with professional membership number) of witness	Signature of witness

Note: Attach the details of company(s)/ LLP(s) in which partner/ designated partner is a director/ partner, as the case may be in the below format as an attachment

S.No.	CIN/ LLPIN	Name of Company/ LLP

Attachments

- 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 such body corporate also on a letterhead mentioning the name and address of an individual nominated to act as nominee/designated partner on its behalf
- *Proof of address of registered office of LLP
- *Subscribers' sheet including consent
- In principle approval of regulatory authority, if required
- Detail of LLP(s) and/ or company(s) in which partner/ designated partner is a director/ partner
- Optional attachment(s) - if any

List of attachments

Part B: Statement

Statement by a person who subscribed his name to the incorporation document

I, the designated partner of the LLP do state that

- (i) I am a person named in the incorporation document as a designated partner/partner of the limited liability partnership;
- (ii) the designated partner(s)/partner(s) have given their prior consent to act as designated partner(s)/partner(s);
- (iii) 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;
- (iv) I make this statement conscientiously believing the same to be true.

**To be digitally signed
by a designated partner**

*DPIN of the designated partner

Statement by an Advocate/ Company Secretary/ Chartered Accountant/ Cost Accountant in practice

I

☐ Son ☐ Daughter of

do state that

- (i) 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

(name of regulatory body) is

(certificate of practice number in case of company secretary/ membership number in all other 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 or fellow ☐ Associate ☐ Fellow

For office use only:

eForm Service request number (SRN) eForm filing date (DD/MM/YYYY)

Digital signature of the authorising officer

This e-Form is hereby approved

This e-Form is hereby rejected

Date of signing (DD/MM/YYYY)