Form 12 [See rule 16(3)]

## Form for intimating other address for service of documents

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

1. *LLPIN	
2. *Name of the Limited Liability Partnership	
3. *Address of Registered Office	
*Line I	
*Line II	
*City:	
*State:	
*ISO Country Code :	
*Country	
*Pin code :	
Phone (with STD Code):	
Fax:	
*Email:	
4. Pursuant to section 13(2) of the Limited Liability Partnership Act, 2008, the above named Limited Liability Partnership declares the following address, other	
than the address of its Registered Office, for serving a document on it or its partner or designated partner:	
Other address:	
Line I	
Line II	
City:	
State:	
ISO Country Code :	
Pin code :	

Phone (with STD Code)
Fax:
Email:
Date of complying with sub-rule(2) of rule 16:
Attachments.
<ul><li>(i) Copy of the minutes of decision/resolution/consent of partners,</li><li>(ii) The extracts of the relevant provision of the Limited Liability Partnership Agreement, if any,</li></ul>
(iii) Proof of address,
(iv)Optional Attachment.
Verification
To the best of my knowledge and belief, the information given in this Form and its attachments is correct and complete.
I a designated partner of
(name of the LLP) am authorized to sign and submit this form.
To be digitally signed by designated partner DPIN DPIN
Date: Place:
Modify Check form Pre-scrutiny Submit
For office use only
This e-form is hereby registered Confirm submission
Digital signature of the authorizing officer