

TO BE PUBLISHED IN THE GAZETTE OF INDIA, EXTRAORDINARY, PART II,  
SECTION 3, SUB-SECTION (i)]

Government of India  
Ministry of Corporate Affairs  
Notification

New Delhi, the 18<sup>th</sup> September, 2018

G.S.R. (E)- In exercise of the powers conferred by sub-sections (1) and (2) of section 79 of the Limited Liability Partnership Act, 2008 (6 of 2009), the Central Government hereby makes the following rules further to amend the Limited Liability Partnership Rules, 2009, namely:—

1. (1) These rules may be called the Limited Liability Partnership (Second Amendment) Rules, 2018.

(2) They shall come into force with effect from the 2<sup>nd</sup> October, 2018.

2. In the Limited Liability Partnership Rules, 2009,-

(a) in rule 3, after sub-rule (2), the following shall be inserted, namely:—

“(3) Form RUN-LiP (Reserve Unique Name-Limited Liability Partnership), Form FiLLiP (Form for incorporation of Limited Liability Partnership), Form 5, Form 17 and Form 18 shall be processed by the Registrar, Central Registration Centre (CRC) for and on behalf of the jurisdictional Registrar.

**Explanation .—** For the purposes of this sub-rule, Central Registration Centre means the office of Central Registration Centre as established under sub-sections (1) and (2) of section 396 of the Companies Act, 2013 (18 of 2013) by the Government of India vide notification number S.O. 218(E), dated 22nd January, 2016

(b) in rule 8, in the proviso, for the word and figure “Form 2”, the word and letters “Form FiLLiP” shall be substitute;

(c) for rule 11, the following rule shall be substituted, namely:-`

" 11. (1) For the purposes of section 11, the incorporation document shall be filed in Form FiLLiP with the Registrar having jurisdiction over the State in which the registered office of the limited liability partnership is to be situated alongwith fee as provided in Annexure 'A':

Provided that if an individual required to be appointed as designated partner does not have a DPIN or DIN, application for allotment of DPIN shall be made in Form FiLLiP :

Provided further that the application for allotment of DPIN shall not be made by more than two individuals in Form FiLLiP:

Provided also that an application for reservation of name may be made through Form FiLLiP:

Provided also that where an applicant had applied for reservation of name under rule 18 in Form RUN-LLP and which has been approved, he may fill the reserved name as the proposed name of limited liability partnership.

(2) (a) Where the Registrar, on examining Form FiLLiP, finds that it is necessary to call for further information or finds such application or document to be defective or incomplete in any respect, he shall give intimation to the applicant to remove the defects and re-submit the e-form within fifteen days from the date of such intimation given by the Registrar.

(b) After re-submission of the document, if the Registrar still finds that the document is defective or incomplete in any respect, he shall give one more opportunity of fifteen days time to remove such defects or deficiencies:

Provided that the total period for re-submission of documents shall not exceed thirty days.

(3) The Certificate of Incorporation of limited liability partnership shall be issued by the Registrar in Form 16.";

(d) in rule 13, -

(a) the word and figure "Form 2" the word and letters "Form FiLLiP" shall be substituted.";

(e) in rule 18, in sub- rule (2) ,-

(A) clause (viii) shall be omitted;


(B) clause (xiv) shall be omitted;

(C) for sub-rule (5) the following shall be substituted, namely:-

“ 5 Every such application shall be made through the web service, RUN-LLP, available at www.mca.gov.in and be accompanied by fee as mentioned in Annexure 'A', which may either be approved or rejected, as the case may be, by the Registrar after allowing a re-submission of such application within fifteen days for rectification of defects.” ;

(f) for Form 1 and Form 2, the following shall be substituted, namely:-

RUN-LLP

 सत्यमेव जयते		<b>RUN-LLP</b> Reserve Unique Name-LLP
Service Request Number:		Dated:
LLP details		
<input type="radio"/> New Request		<input type="radio"/> Resubmission
SRN	<input type="text"/>	<input type="button" value="Pre-fill"/>
New Incorporation / Conversion		
<input type="text"/>		
CIN	<input type="text"/>	
LLPIN	<input type="text"/>	
Proposed Name 1	<input type="text"/>	
Proposed Name 2	<input type="text"/>	

Auto Check

Comments

Choose File No file chosen

Once you have submitted the name reservation request it will then be checked and, if found feasible, approved by the Central Registration Centre (CRC). You will receive an email from the CRC advising the outcome of the name reservation request.

## FiLLiP



## FiLLiP

(Form for incorporation of Limited Liability Partnership)

[Pursuant to rule 8 and rule 11 and rule 18 of Limited Liability Partnership Rules, 2009]

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

### Part A: Incorporation document

\*Whether name is already approved by Registrar of Companies  Yes  No

1. Service Request Number (SRN) of **RUN-LLP**

Pre-fill

2 \*(a) New Incorporation / Conversion

(b) CIN

3. \*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

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

5. 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)

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

Description of main division of industrial activity

7 (a) \*Total number of designated partners and partners of the LLP

	Having valid DIN/DPIN	Not having valid DIN/DPIN
Total number of Designated Partners (individual + nominees of bodies corporate)		
Number of individual designated partners		
Number of designated partners who are nominees of bodies corporate		
Total number of Partners (individual + body corporate)		
Number of individual partners		
Number of bodies corporate partners		

(b) Particulars of individual designated partners

*Designated partner identification number (DIN/DPIN)	<input type="text"/>	<input type="button" value="Pre-Fill"/>
*Name	<input type="text"/>	
*Gender	<input type="text"/>	Date of Birth <input type="text"/> *Nationality <input type="text"/>
*Whether resident of India	O Yes O No	
*Occupation	<input type="text"/>	
*email ID	<input type="text"/>	
In case of company seeking conversion		
(i) Number of shares held	<input type="text"/>	(ii) Paid up value of shares held (in Rs) <input type="text"/>
*Form of contribution	<input type="text"/>	
*Monetary value of contribution (in Rs.)	<input type="text"/>	(in words) <input type="text"/>
*Number of LLP(s) in which he/ she is a partner	<input type="text"/>	
*Number of company(s) in which he/ she is a director	<input type="text"/>	

*First Name	<input type="text"/>	
Middle Name	<input type="text"/>	
*Surname	<input type="text"/>	
*Father's first name	<input type="text"/>	
Father's middle name	<input type="text"/>	
*Father's surname	<input type="text"/>	
*Gender	<input type="text"/>	*Date of Birth <input type="text"/> *Nationality <input type="text"/>
*Place of Birth	<input type="text"/>	
*Whether citizen of India	<input type="radio"/> Yes <input type="radio"/> No	*Whether resident in India <input type="radio"/> Yes <input type="radio"/> No
*Occupation type	<input type="radio"/> Self Employed <input type="radio"/> Professional <input type="radio"/> Homemaker <input type="radio"/> Student <input type="radio"/> Serviceman	
*Area of Occupation	<input type="text"/>	
if 'Others' selected, please specify	<input type="text"/>	
*Educational Qualification	<input type="text"/>	
* <input type="checkbox"/> PAN <input type="checkbox"/> Passport number	<input type="text"/>	<input type="button" value="With Out"/>
*email ID	<input type="text"/>	
Permanent Address	<input type="text"/>	
*Line I	<input type="text"/>	
Line II	<input type="text"/>	
*City	<input type="text"/>	
* State/ Union Territory	<input type="text"/>	Pin code <input type="text"/>
	<input type="text"/>	<input type="text"/>

\*ISO Country code  Country

\*Phone (with STD/ISD code)

\*Whether present residential address same as permanent residential address:  Yes  No

Present address

\*Line I

Line II

\*City

\*State/ Union Territory  Pin code

\*ISO Country code  Country

\*Phone (with STD/ISD code)

\*Duration of stay at present address  Years  Months

If Duration of stay at present address is less than one year then address of previous residence

\*Proof of identity  \*Residential Proof

Voter's identity card number

Driving license number

Aadhaar Number

**Submit the proof of identity and proof of address under attachments.**

In case of company seeking conversion

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

\*Form of contribution

\*Monetary value of contribution (in Rs.)   
 (in words)

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

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

(C) Particulars of bodies corporate and their nominees as designated partners

I \*Type of body corporate

\* 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) any other registration number

\*Name of the body corporate

Registered office address or Principal place of business in India or Principal place of business outside India

\*Line I   
 Line II   
 \*City   
 \*State /Union Territory  \*Pin code   
 \*ISO Country code   
 Country   
 \*Phone (With STD/ISD code)  -   
 Fax   
 \*email id

**In case of company seeking conversion**

(i) Number of shares held  (ii) Paid up value of shares held (in Rs)   
 \*Form of contribution   
 \*Monetary value of contribution (in Rs.)   
 (in words)   
 \*Number of LLP(s) in which he/ she is a partner   
 \*Number of company(s) in which he/ she is a director

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

\*Designated partner identification number (DIN/DPIN)   
 \*Name   
 \*Gender  Date of Birth  Nationality   
 \*Whether resident of India  O Yes O No  
 \*Occupation   
 \*email ID   
 \*Designation & Authority in body corporate



\*Type of body corporate

\* 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) any other registration number

Pre-Fill

\*Name of the body corporate

Registered office address or Principal place of business in India or Principal place of business outside India

\*Line I

Line II

\*City

\*State /Union Territory

\*Pin code

\*ISO Country code

Country

\*Phone (With STD/ISD code)

Fax

\*email id

In case of company seeking conversion

(i) Number of shares held

(ii) Paid up value of shares held (In Rs)

\*Form of contribution

\*Monetary value of contribution (In Rs.)

(in words)

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

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

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

\*First Name

Middle Name

\*Surname

\*Father's first name

Father's middle name

\*Father's surname

\*Gender

\*Date of Birth

Nationality

\*Place of Birth

\*Whether citizen of India  Yes  No

\*Whether resident in India  Yes  No

\*Occupation type  Self Employed  Professional  Homemaker  Student  Serviceman

\*Area of Occupation

If 'Others' selected, please specify

\*Educational Qualification

\*  PAN  Passport number

\*email ID

Permanent

\*Line I

Line II

\*City

\* State/ Union Territory  Pin code

\*ISO Country code  Country

\*Phone (with STD/ISD code)

\*Whether present residential address same as permanent residential address  Yes  No

Present address

\*Line I

Line II

\*City

\*State/ Union Territory  Pin code

\*ISO Country code  Country

\*Phone (with STD/ISD code)

\*Duration of stay at present address  Years  Months

If Duration of stay at present address is less than one year then address of previous residence

\*Proof of Identity  \*Residential Proof

Voter's identity card number

Driving license number

Aadhaar Number

**Submit the proof of identity and proof of address under attachments.**

(d). Particulars of individual partner(s)

\*O Income tax permanent account number    
 (Income-tax PAN) or O Passport number or O DIN/ DPIN

\*Name of partner

\*Father's Name

\*Nationality

\*Whether resident of India  Yes  No

\*Date of Birth  (DD/MM/YYYY)

\*Occupation

\* Permanent Residential Address

\* Line I

Line II

\*City  \*District

\*State  \*Pin code

\*Country  - ISO Country code

\*Whether present residential address is same as the permanent residential address  Yes  No

\*If no, present residential address:

\* Line I

Line II

\*City  \*District

\*State  \*Pin code

\*Country  - ISO Country code

Phone  Fax

Mobile

\* e mail ID

In case of company seeking conversion

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

\*Form of contribution

\*Monetary value of contribution (in Rs.)

(in words)

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

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

(e) Particulars of bodies corporate as partner(s)

\*Type of body corporate

\* CIN or FCRN or LLPIN or FLLPIN or any other identification number

\*Name of body corporate

\*Country where Registered

\*Full address of the registered office or principal place of business in India

ISO country code

Phone

Fax

\* e-mail ID

In case of company seeking conversion

(i) Number of shares held

(ii) Paid up value of shares held (in Rs.)

\*Form of contribution

\*Monetary value of

contribution (in Rs.)

(in words)

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

\* O Income tax permanent account number

(Income-tax PAN) or O Passport number or O DIN/ DPIN

Verify Income Tax  
PAN/Pre -fill

\*Name of Nominee

\*Father's Name

\*Nationality

\*Whether resident of India O Yes O No

\*Date of Birth (DD/MM/YYYY)

\*Occupation

Designation & Authority in body corporate

\* Permanent Residential Address

\* Line I

Line II

\*City

\*District

\*State

\*Pin code

\*Country

ISO Country code

\*Whether present residential address is same as the permanent residential address O Yes O No

\*If no, present residential address:

\* Line I

Line II

\*City

\*District

\*State

\*Pin code

*Country	<input type="text"/>	ISO Country cod	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>
Mobile	<input type="text"/>		
* e-mail ID	<input type="text"/>		

8.\*Particulars of the proposed or approved name

9.	Proposed or approved name	<input type="text"/>
	Significance of abbreviated or coined word in the proposed name	<input type="text"/>
	State the name of the vernacular language(s) if used in the proposed name and meaning thereof	<input type="text"/>

(a) Whether the proposed name is based on a trademark registered or is subject matter of an application pending for registration under the Trade Marks Act  Yes  No

(b)\*If yes, furnish particulars of trade mark or application

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

(in Rs.) (in figures)

(in words)

11.\*Whether addendum to FiLLIP is required to be filed (refer instruction kit for details)  Yes  No

12. 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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>




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.
- Approval of the owner of the trademark or the applicant of such application for registration of Trademark;
- Copy of approval in case the proposed name contains any word(s) or expression(s) which requires approval from central government;
- Copy of approval from the competent authority in case of collaboration and connection with the foreign country or place
- Proof of identity and address of Applicant I
- Proof of identity and address of Applicant II
- Copy of Board resolution of the existing company or consent of existing LLP as a proof of no objection
- Optional attachment(s) - if any

### List of Attachments

- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach
- Attach

Remove Attachment

### Verification:

- \*To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete. I further confirm that the proposed name is not undesirable, identical or too nearly resembles to that of

any other partnership firm or limited liability partnership or body corporate or a registered trade mark or a trade mark which is subject of an application for registration of any other person under the Trade Marks Act, 1999.

### 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) 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 in respect of Designated Partner Identification Number (DPIN), registration of the LLP and matters precedent or incidental thereto have been complied with;
- (iv) I make this statement conscientiously believing the same to be true.

To be digitally signed  
by a designated partner

DSC BOX

\*DIN/DPIN/PAN of the designated partner

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

I

O Son O Daughter of

do state that

- (i) I am
  - Advocate
  - Cost Accountant in whole time practice
  - Chartered Accountant in whole time practice
  - Company Secretary 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

DSC BOX

Modify

Check Form

Prescrutiny

For office use only:

E form Service request number (SRN)

e Form filing date

DD/MM/YYYY

**Digital signature of the Authorizing officer**

This e-Form is hereby approved

DSC BOX

This e-Form is hereby rejected

DSC BOX

Confirm Submission

Date of signing

(DD/MM/YYYY)

;

(g) for Form 5, the following form shall be substituted, namely:-

**LLP FORM NO.5**

[Pursuant to rule 20(2) of Limited Liability Partnership Rules, 2009]

**Notice for change of name**

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

1.\*Limited Liability Partnership Identification number (LLPIN)

Pre-fill

2.(a). Name of the Limited Liability Partnership (LLP)

(b) Address of the registered office of the

(c) \*e-mail ID of the company

3.\*Service Request Number (SRN) of **RUN**-LLP

Pre-fill

4. New name of LLP after change

5. Whether change in name is due to change in business of the LLP  Yes  No  
if yes, mention new/changed business of LLP

if no, give other reasons for change of name

6. Whether change in name is

- based on the procedure laid down in the LLP agreement
- with consent of partners
- based on the direction from Central Government

7. SRN of Form 3 (in case change of name is due to change in business of LLP)

8.\*Date on which consent of partner(s) was taken under sub-rule(1) of rule 20

(DD/MM/YYYY)

**Attachments**

List of Attachments

- 1. Copy of the minutes of decision/resolution/ consent of partners
- 2. The extracts of the relevant provision of the Limited Liability Partnership Agreement, if any.
- 3. If change is due to a direction received from the Central Government/ Registrar, then a copy of such direction.
- 4. Optional attachment(s) - if any

Attach	
Attach	
Attach	
Attach	
	Remove Attachment

**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

DSC BOX

\*DIN/DPIN of the designated partner

**Certificate**

It is hereby certified that I have verified the above particulars (including attachment(s)) 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 to this form.

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

\*Whether associate or fellow  Associate  Fellow

DSC BOX

\*Membership number or Certificate of practice number

Modify

Check Form

Prescrutiny

For office use only:



E form Service request number (SRN)

e Form filing date

DD/MM/YYYY

**Digital signature of the**

**Authorizing officer**

This e-Form is hereby approved

DSC BOX

Confirm Submission

This e-Form is hereby rejected

DSC BOX

Date of signing

(DD/MM/YYYY) .";

(h) for Form 16, Form 17, Form 18 and Form 19, the following forms shall be substituted, namely:-



GOVERNMENT OF INDIA  
MINISTRY OF CORPORATE AFFAIRS  
Central Registration Centre  
Form 16

[Refer Rule 11(3) of the Liability Partnership Rules, 2009]

**CERTIFICATION OF INCORPORATION**

LLP Identification Number:

It is hereby certified that ..... is incorporated pursuant to section 12(1) of the Limited Liability Partnership Act 2008.

Given under my hand at Manesar this ..... day of ..... Two Thousand .....

For and on behalf of the Jurisdictional Registrar of Companies  
Registrar of Companies  
Central Registration Centre

Disclaimer: This certificate only evidences incorporation of the LLP on the basis of documents and declarations of the applicant(s). This certificate is neither a license nor permission to conduct business or solicit deposits or funds from public. Permission of sector regulator is necessary wherever required. Registration status and other details of the LLP can be verified on [www.mca.gov.in](http://www.mca.gov.in)

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Mailing Address as per record available in Registrar Office:

**LLP FORM NO.17**

[Pursuant to rule 38(1) of Limited Liability Partnership Rules, 2009]


**Application and statement for  
the conversion of a  
firm into Limited Liability  
Partnership (LLP)**

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

**Part A: Application**1. Service Request Number of **RUN**-LLP

Pre-fill

2. Name of the Limited Liability Partnership LLP

3. \* Name of the firm

4. Principal address of the firm

\* Line I

Line II

\*City

\*District

\*State

\*Pin code

\*Country

ISO Country code

Phone

Fax

\*e-mail ID

5.(a)\*Whether the firm is registered under the Partnership Act,1932.  Yes  No

If yes, date of registration

(DD/MM/YYYY)

Registration No.

If no, whether the firm is registered under any other law

 Yes  No

If yes, the name of the Statute under which registered

If yes, date of registration

(DD/MM/YYYY)

Registration No.

(b)\*Date of agreement by which firm was formed

(DD/MM/YYYY)

6.\*Total number of partners in the firm

7.\*Total capital contribution in the firm (in Rs.)

8. Total number of partners in the LLP

9.\* Whether all the partners of firm have given their consent for conversion of the firm into the limited liability partnership. (attach the copy of the consent. )  Yes  No

10.\* Whether all the partners of the limited liability partnership comprise all the shareholders of the company and no one else.  Yes  No

11.\* Whether up to date Income-tax return is filed under the Income-tax Act, 1961.  Yes  No  
If Yes, indicate the financial year end date upto which such return has been filed   
(DD/MM/YYYY)

12.\* Whether any proceeding by or against the company is pending in any Court or Tribunal or any other Authority.  Yes  No

If yes, particulars of such proceedings in the following manner

Number of proceedings	<input type="text"/>				
1	<table border="1"><tr><td>Name of Court/Tribunal/ Authority</td><td><input type="text"/></td></tr><tr><td>Particulars</td><td><input type="text"/></td></tr></table>	Name of Court/Tribunal/ Authority	<input type="text"/>	Particulars	<input type="text"/>
Name of Court/Tribunal/ Authority	<input type="text"/>				
Particulars	<input type="text"/>				

13.\* Whether any earlier application for conversion of the said firm into limited liability partnership was refused by the Registrar.  Yes  No

If yes, give SRN of earlier Form 17 and the reasons for refusal:-

(a) SRN

(b) Reasons for refusal of earlier Form 17:

14.\* Whether any conviction, ruling, order, judgment of any Court, Tribunal or other authority in favour of or against the firm are subsisting.  Yes  No

If yes, details thereof in following manner:-

Number of proceeding

1

Section and the title of relevant Act

Particulars

Name of Court/Tribunal/  
Authority

15(a). \*Whether there are any secured creditors

Yes  No

(b) Whether consent of all the secured creditors for conversion of the firm into limited partnership has been obtained

Yes  No

If Yes, attach the list and consent of such creditors

16. \*Whether any clearance, approval or permission for conversion of the company into limited liability partnership is required from any body/ authority

Yes  No

If Yes, whether the applicable approvals from the concerned body/authority or authorities have been obtained.

Yes  No

#### Part B- Statement

##### Declaration

\*I, partner of

registered under the Indian Partnership Act, 1932 or under

at  (name of the place) in the

State/UT of  Territory) on

(DD/MM/YYYY) registration number  and also named in the incorporation document of

as a partner or designated partner give my consent for the conversion of the said firm M/s

into the limited liability partnership.



\*2. I state that I shall be personally liable (jointly and severally with the limited liability partnership) for the liabilities and obligations of the firm which were incurred prior to the conversion or which arose from any contract entered into prior to the conversion.

\*I further state as under:

- (i) that all the requirements of the Limited Liability Partnership Act, 2008 and the rules made thereunder have been complied with, in respect of conversion of private company/ unlisted public company into limited liability partnership and matters precedent and incidental thereto;
- (ii) that all the partners of the limited liability partnership comprise all the partners of the firm and no one else;
- (iii) that the applicable clearances, approvals or permissions for conversion of the firm into a limited liability partnership from any body/ authority have been obtained.
- (iv) that the consent of all the secured creditors for conversion of the firm into limited liability partnership has been obtained;
- (v) that to the best of my knowledge and belief, the information given in this form and its attachments is correct and complete.

#### Attachments

1. \*Statement of consent of partners of the firm.
2. \*Statement of Assets and Liabilities of the firm duly certified As true and correct by the Chartered Accountant in practice.
3. Copy of acknowledgement of latest income tax return
4. \*List of all the secured creditors along with their consent to the conversion.
5. Approval from any other body/authority.
6. Optional attachment(s)- if any

Attach

Attach

Attach

Attach

Attach

Attach

#### List of Attachments

Remove Attachment

To be digitally signed by a designated Partner

DSC BOX

\*DIN/DPIN/PAN 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 required attachment(s) have been completely attached to this form.

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

\*Whether associate or fellow  Associate  Fellow

DSC BOX

\*Membership number or Certificate of practice number

Modify

Check Form

Prescrutiny

**For office use only:**

E form Service request number (SRN)

e Form filing date

DD/MM/YYYY

**Digital signature of the**

**Authorizing officer**

This e-Form is hereby approved

DSC BOX

Confirm Submission

This e-Form is hereby rejected

DSC BOX

Date of signing

(DD/MM/YYYY)

## LLP FORM NO.18

[Pursuant to paragraphs 2 and 3 of Third Schedule, paragraphs 2,3 and 4 of Fourth Schedule of the Act and rule 39(1) and 40(1)]of Limited Liability Partnership Rules, 2009]



Application and Statement for conversion of a private company / unlisted public company into limited liability partnership (LLP).

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

### Part A- Application

1. Service Request Number (SRN) of **RUN**-LLP

Pre-fill

2. \* Name of the proposed LLP

3. \* Corporate Identity Number (CIN)

Pre-fill

4. Name of the Company

5. Date of incorporation

(DD/MM/YYYY)

6. Name of office of Registrar of Companies

7.(a)Address of the registered office of the company

7.(b)\*e-mail ID of the company

8.\*Total number of shareholders

9. Total number of partners in the LLP

10.\*Whether all the shareholders of the company have given their consent for conversion of the company into the limited liability partnership.

Yes  No

11. \*Whether all the partners of the limited liability partnership comprise all the shareholders of the company and no one else.

Yes  No

12. \*Whether any security interest in the assets of the company is subsisting or in force.  Yes  No

If yes, give details

13. \*Whether up to date Income-tax return is filed under the income-tax Act, 1961

Yes  No

If yes, indicate the financial year end date upto which such return is filed

(DD/MM/YYYY)

14. \*Whether any prosecution initiated against or show cause notice received by the company for alleged offences under the Companies Act, 2013.

Yes  No

If yes, give details in the following manner

Number of cases

- 1 Date of issue of show cause notice

Section of the Companies Act under which action being initiated

Status (reply sent or under examination by concerned Authority)

- 15 \*Whether any proceeding by or against the company is pending in any Court or Tribunal or any other Authority.

Yes  No

If yes, give details in the following manner:-

Number of proceedings

- 1 Name of Court or Tribunal Or Authority

Particulars of such proceedings

16. \*Whether any earlier application for conversion of the said company into limited liability partnership was refused by the Registrar.

Yes  No

If yes, give SRN of earlier Form 18 and the reasons for refusal:

(i) SRN

(ii) Reasons

17. \*Whether any conviction, ruling, order, judgment of any Court, Tribunal or

Yes  No

other authority in favour of or against the company is subsisting.

If yes, details thereof in following manner:-

Number of proceeding

1	Section and the title of relevant Act	<input type="text"/>
	Particulars	<input type="text"/>
	Name of Court or Tribunal or Authority	<input type="text"/>

18. (a) \*Whether there are any secured creditors

Yes  No

(b) Whether consent of all the secured creditors for conversion of the company into limited partnership has been obtained

Yes  No

If Yes, attach the list and consent of such creditors

19. \*Whether any clearance, approval or permission for conversion of the company into limited liability partnership is required from any body/ authority

Yes  No

If Yes, whether the applicable approvals from the concerned body/authority have been obtained

Yes  No

20. \*Whether up to date documents including latest balance sheet and annual returns under Companies Act, 2013 have been filed.

Yes  No

#### Part B- Statement

##### Declaration

\*I, the shareholder of

and also named in the incorporation document of

as a partner or designated partner give my consent for the conversion of the said company

into the limited liability partnership

\*I state as under:



- (i) that all the requirements of the Limited Liability Partnership Act, 2008 and the rules made thereunder have been complied with, in respect of conversion of private company/ unlisted public company into limited liability partnership and matters precedent and incidental thereto;
- (ii) that all the partners of the limited liability partnership comprise all the shareholders of the company and no one else;
- (iii) that the applicable clearances, approvals or permissions for conversion of the company into a limited liability partnership from any authority/ authorities have been obtained.
- (iv) that the consent of all the secured creditors for conversion of the company into limited liability partnership has been obtained;
- (v) that all the documents due for filing including latest balance sheet and annual return have been filed under the provision of the Companies Act, 2013;
- (vi) that to the best of my knowledge and belief, the information given in this form and its attachments is correct and complete.

**Attachments**

- 1. \*Statement of shareholders.
- 2. \*Statement of Assets and Liabilities of the company duly certified as true and correct by the auditor.
- 3. List of all the secured creditors along with their consent
- 4. Approval from any other body/authority.
- 5. \*Copy of acknowledgement of latest income tax return.
- 6. Optional attachment(s)- if any

Attach

Attach

Attach

Attach

Attach

**List of attachments**

Remove Attachment

To be digitally signed by a designated partner

DSC BOX

\* DIN/DPIN/PAN 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 required attachment(s) have been completely attached to this form.

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

\*Whether associate or fellow  Associate  Fellow

DSC BOX

\*Membership number or certificate of practice number

Modify

Check Form

Prescrutiny

**For office use only:**

E form Service request number (SRN)

e Form filing date

DD/MM/YYYY

**Digital signature of the Authorizing officer**

This e-Form is hereby approved

DSC BOX

Confirm Submission

This e-Form is hereby rejected

DSC BOX

Date of signing

(DD/MM/YYYY)



GOVERNMENT OF INDIA

MINISTRY OF CORPORATE AFFAIRS

Central Registration Centre

Form 19

[Refer Rule 32(1) of the LLP Rules, 2009]

CERTIFICATE OF REGISTRATION ON CONVERSION

OF

.....

[Firm/Company]

to

.....

[Insert name of limited liability partnership]

LLP Identification Number:

It is hereby certified that ..... is this day registered pursuant to section 58(1) of the LLP Act 2008.

Given under my hand at Manesar this ..... day of ....., Two Thousand .....

For and on behalf of the Jurisdictional Registrar of Companies  
Registrar of Companies  
Central Registration Centre

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Disclaimer: This certificate only evidences incorporation of the LLP on the basis of documents and declarations of the applicant(s). This certificate is neither a license nor permission to conduct business or solicit deposits or funds from public. Permission of sector regulator is necessary wherever required. Registration status and other details of the LLP can be verified on [www.mca.gov.in](http://www.mca.gov.in)

Mailing Address as per record available in Registrar Office:

[F.No. 17/61/2016-CL-V (Pl.I)]

  
(K.V.R MURTY)

Joint Secretary Government of India

Note: The principal Rules were published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-Section (i), vide GSR Number 299(E), dated the 1st April, 2009 and subsequently amended vide the following notifications:-

S.N	Notification Number	Notification Date
1.	G.S.R 299 (E)	1 <sup>st</sup> April, 2009
2.	G.S.R 385 (E)	4 <sup>th</sup> June, 2009
3.	G.S.R 24(E)	11 <sup>th</sup> January, 2010
4.	G.S.R 914 (E)	15 <sup>th</sup> November, 2010
5.	G.S.R 506(E)	05 <sup>th</sup> July, 2011
6.	G.S.R 680(E)	14 <sup>th</sup> September, 2011
7.	G.S.R 796(E)	04 <sup>th</sup> November, 2011
8.	G.S.R 430(E)	05 <sup>th</sup> June, 2012
9.	G.S.R 485(E)	21 <sup>st</sup> June, 2012
10.	G.S.R 692(E)	14 <sup>th</sup> September, 2012
11.	G.S.R 786(E)	15 <sup>th</sup> October, 2015
12.	G.S.R 418(E)	13 <sup>th</sup> April, 2016
13.	G.S.R 593(E)	10 <sup>th</sup> June, 2016
14.	G.S.R 470(E)	16 <sup>th</sup> May, 2017
15.	G.S.R 557(E)	12 <sup>th</sup> June, 2018