

## Table of Contents

|                                                                         |           |
|-------------------------------------------------------------------------|-----------|
| <b>1 PART I – LAW(S) GOVERNING THE WEBFORM .....</b>                    | <b>2</b>  |
| 1.1 Purpose of the webform .....                                        | 2         |
| 1.2 Important Check Points while filling up the webform.....            | 2         |
| <b>2 PART II – ACCESSING THE LLP Form No. 4 APPLICATION .....</b>       | <b>4</b>  |
| 2.1 Application Process for LLP Form No. 4 .....                        | 4         |
| <b>3 PART III – INSTRUCTIONS TO FILL THE WEBFORM.....</b>               | <b>6</b>  |
| 3.1 Specific Instructions to fill ‘LLP Form No. 4’ at Field Level ..... | 6         |
| 3.2 Other instructions to fill ‘LLP Form No. 4’ .....                   | 20        |
| <b>4 PART IV – KEY POINTS FOR SUCCESSFUL SUBMISSION .....</b>           | <b>20</b> |
| 4.1 Fee rules .....                                                     | 21        |
| 4.2 Processing Type.....                                                | 22        |
| 4.3 Useful links .....                                                  | 22        |

## ABOUT THIS DOCUMENT

This Instruction Kit is designed as a step by step guide to assist the user in filling up the webform. This document provides references to law(s) governing the webform, guidelines to access the application, instructions to fill the webform at field level and important check points while filling up the webform along with other instructions to fill the webform.

*User is advised to refer to the respective instruction kit for filing of webform.*

This document is divided into following sections:



**Part I – Law(s) governing the webform**



**Part II– Accessing the LLP Form No. 4 application**



**Part III – Instructions to fill the webform**



**– Part IV – Key points for successful submission**

*Click on any section link to refer to the particular section.*

## **1 PART I – LAW(S) GOVERNING THE WEBFORM**

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Pursuant to rule **8, 10(3), 22(2) and 22(3)** of The Limited Liability Partnership Rules, 2009.

### **1.1 Purpose of the webform**

This webform aims to simplify the process of application by a LLP with the concerned Registrar of Companies (RoC) for the following scenarios:

- i. Where a person becomes a Designated Partner or Partner; or ceases to be one, then a notice is filed with the Registrar within thirty days from the date he becomes or ceases to be a Designated Partner or Partner; and
- ii. Where there is any change in the particulars of a Partner, a notice is filed with the Registrar within thirty days of such change.

### **1.2 Important Check Points while filling up the webform**

*Please read instructions and guidelines carefully before filling online application forms.*

*Please attach the required mandatory supporting documents in the specified format only.*

*Please ensure that applicant of the webform is registered at MCA portal as a business user before filing the webform.*

*Please note that the LLP for which the webform is being filed should have a valid LLPIN.*

*Please ensure that the DSC attached in the webform is associated with the LLP for which the webform is being filed.*

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

*Please ensure that the DPIN as provided in the webform is not flagged for disqualification of the Designated Partner.*

*Please ensure that the DSC attached in the webform is registered on MCA portal against the DIN/DPIN/PAN/Membership number as provided in the webform.*

*Please note that the signing authority of the webform should have valid and non-expired/non-revoked DSC or valid DIN/DIN/PAN.*

*Please note that you can file this webform with different event dates (date of appointment, date of change in designation, date of cessation, date of change in nominee etc.) only if these dates are within 30 days of the filing date. If any of the date(s) are beyond 30 days, then separate form is to be filed for every such event date.<sup>1</sup>*

*For filing of details of two or more events (for example, appointment and cessation) relating to the same person, you are required to file separate forms. These cannot be filed through the same form.*

*Please ensure that in case of change in Designated Partners or Partners in the LLP (i.e. appointment or cessation), this form is to be filed along with filing of LLP Form No. 3 as a linked form to it for change in*

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<sup>1</sup> For example: "Partner A is appointed on 1st April, Partner B is appointed on 18th April, and Designated Partner C ceases to be associated with the LLP w.e.f. 18th April. In such a case details of all the three changes can be filed through the same Form 4 only if the Form is filed on or before 1st May, as all the events fall within 30 days. However, if the LLP files the Form 4 on 10th of May, then details in a separate Form would be required to be filed in respect of Partner A."

*LLP agreement. In such case, details of all Designated Partners/Partners as per LLP Form No. 3 should be mentioned in LLP Form No. 4.*

*Please ensure that at least one of the Designated Partners in the LLP after considering changes as per Form 4 should be resident of India. Resident of India means a person who has stayed in India not less than 182 days during immediately preceding 1 year.*

*Please note that details of only 500 Designated Partner(s) and Partner(s) can be provided in this form. In case the total of number of Designated Partner(s) and Partner(s) exceeds 500, user is required to file details of additional Designated Partner(s) and Partner(s) by filing LLP Form No. 4 again.*

*Please note that filing of this form shall not be allowed in case there is another Form 4 pending for payment of fee, or another Form 4 is under processing in respect of the LLP.*

*Please ensure that in case of cessation/ change in designation of Designated Partners, if the number of Designated Partners reduce below 2 (two), the Designated Partners should be appointed within 6 months of such a scenario, otherwise the LLP shall not be allowed to file any form on the LLP portal.*

*If the space within any of the fields is not sufficient to provide all the information, then additional details can be provided as an optional attachment to the webform.*

*Please check for any alerts that are generated using the "Notifications and alerts" function under the 'My*

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

*Workspace' page in the FO user dashboard on the MCA website.*

## **2 PART II – ACCESSING THE LLP Form No. 4 APPLICATION**

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### **2.1 Application Process for LLP Form No. 4**

#### **2.1.1 Initial Submission**

##### **2.1.1.1 Option 1**

**STEP 1:** Access MCA homepage

**STEP 2:** Login to MCA portal with valid credentials<sup>2</sup>

**STEP 3:** Select “MCA services” and further select “E-Filing”

**STEP 4:** Select “LLP Forms Download”

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

**STEP 5:** Access “Notice of appointment, cessation, change in name/ address/designation of a Designated Partner or Partner and consent to become a Partner/Designated Partner”

**STEP 6:** Enter LLP Information<sup>3</sup>

**STEP 7:** Search LLPIN using the search option (optional)<sup>4</sup>

**STEP 8:** Select LLPIN form the dropdown option (optional)<sup>5</sup>

**STEP 9:** Fill up the application

**STEP 10:** Save the webform as a draft (optional)<sup>6</sup>

**STEP 11:** Submit the webform

**STEP 12:** SRN is generated upon submission of webform (The SRN can be used by the user for any future correspondence with MCA)

**STEP 13:** Affix the DSC

**STEP 14:** Upload the DSC affixed PDF document on MCA portal

**STEP 15:** Pay Fees (In case the user does not successfully upload the DSC affixed PDF within 15 days of SRN generation and complete the payment within 7 days of successful upload of DSC affixed document or due date of filing of the form + 2 days, whichever is earlier, the SRN will be cancelled.) **STEP 16:** Acknowledgement is generated

#### 2.1.1.2 Option 2

**STEP 1:** Access MCA homepage

**STEP 2:** Access LLP form No. 4 through search bar on MCA homepage (website search)<sup>7</sup>

**STEP 3:** Login to MCA portal with valid credentials

**STEP 4:** Enter LLP Information<sup>2</sup>

**STEP 5:** Search LLPIN using the search option (optional)<sup>4</sup>

**STEP 6:** Select LLPIN form the dropdown option (optional)<sup>5</sup>

<sup>2</sup> In case Option 1 is selected, the user will have an option to either login immediately after accessing the MCA homepage, or login after selecting “Notice of appointment, cessation, change in name/ address/designation of a Designated Partner or Partner and consent to become a Partner/Designated Partner” in case the user is not already logged in.

<sup>3</sup> In case the user filling the webform is an LLP user then, LLPIN and LLP name will be auto populated based on the user id from which the user logs in.

<sup>4</sup> In case the user filling the webform is a Professional user, a search option will be provided on the page allowing the user to search for LLPIN basis name of LLP. <sup>5</sup>

In case the user filing the webform is any other business user, a dropdown option containing a list of all the LLPINs’ and corresponding LLP name for LLP’s where the user is associated shall be displayed.

<sup>6</sup> The option to save the webform as a draft shall be enabled once the user enters the “LLPIN”.

<sup>7</sup> In case Option 2 is selected, the user will have an option to either login immediately after accessing the MCA homepage or login after performing the website search.

**STEP 7:** Fill up the application

**STEP 8:** Save the webform as a draft (optional)<sup>6</sup>

**STEP 9:** Submit the webform

**STEP 10:** SRN is generated upon submission of webform (The SRN can be used by the user for any future correspondence with MCA)

**STEP 11:** Affixing of DSC

**STEP 12:** Upload the DSC affixed PDF document on MCA portal

**STEP 13:** Pay Fees (In case the user does not successfully upload the DSC affixed PDF within 15 days of SRN generation and complete the payment within 7 days of successful upload of DSC affixed document or due date

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

of filing of the form + 2 days, whichever is earlier, the SRN will be cancelled.) **STEP 14:** Acknowledgement is generated

### 3 PART III – INSTRUCTIONS TO FILL THE WEBFORM

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#### 3.1 Specific Instructions to fill ‘LLP Form No. 4’ at Field Level

*Instructions to fill ‘LLP Form No. 4’ are tabulated below at field level. Only important fields that require detailed instructions are explained. Self-explanatory fields are not explained.*

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Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                              | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----------|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 (a)     | Limited Liability Partnership Identification Number (LLPIN)                                             | i. Enter a valid and approved LLPIN.<br>ii. The field to enter the LLPIN shall be prefilled on the basis of LLP information entered by the user. iii. A search option shall also be provided to search the LLPIN basis the name of the LLP. Either the full name of the LLP or partial name can be used to search the LLPIN.<br>iii. LLPIN should same as entered in Parent Form 3 LLP                                                                                                                  |
| 1 (b)     | Name of the Limited Liability Partnership (LLP)                                                         | These fields shall be prefilled based on the LLPIN entered in field number 1 (a) i.e. Limited Liability Partnership Identification Number (LLPIN).                                                                                                                                                                                                                                                                                                                                                      |
| 1 (c)     | Address of the registered office of the LLP                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 1 (d)     | Email ID                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 2 (a)     | Number of individual Designated Partner(s) for which this form is being filed                           | i. Enter the total number of Designated partner(s) and partner(s) for which this webform needs to be filed.<br>ii. Based on the number entered here, number of blocks shall be displayed for entering the details.<br>iii. Details of only 500 Designated Partner(s) and partner(s) can be provided in this form. In case the total of number of Designated Partner(s) exceeds 500, user is required to file details of additional Designated Partner(s) and partner(s) by filing LLP Form No. 4 again. |
| 2 (b)     | Number of bodies corporate and their nominees as Designated Partners for which this form is being filed |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 2 (c)     | Number of individual partner(s) for which this form is being filed                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 2 (d)     | Number of bodies corporate as partners and their nominees for which this form is being filed            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 3         | Details of individual Designated Partner(s) for which this form is being filed                          | i. This field shall be displayed and mandatory in case value entered in field number 2 (a) i.e. 'Number of individual Designated Partner(s) for which this form is being filed' is greater than zero.<br>ii.                                                                                                                                                                                                                                                                                            |
| 3 (a)     | The form is being filed for                                                                             | Select the purpose for which form is being filed from the checkbox options provided.<br>iii. If the form is filed as a linked form to LLP Form No. 3, only 'Appointment' OR 'Cessation' can be selected from the options provided under this field.<br>iv. If the form is being filed on standalone basis values other than 'Appointment' or 'Cessation' can be selected in the given field.<br>Multiple checkboxes are not allowed for selection                                                       |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                              | Instructions                                                                                                                                                                                                                                                                                           |
|-----------|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 (b)     | Date of Event                                                                                           | i. Enter date of event in case of appointment or cessation or change in designation.                                                                                                                                                                                                                   |
|           | Changed designation (Category)                                                                          | ii. Please enter a date which is less than or equal to system date in this field.                                                                                                                                                                                                                      |
| 3 (c)     |                                                                                                         | iii. This field shall be displayed and mandatory in case value entered in field number 2 (a) i.e. 'Number of individual Designated Partner(s) for which this form is being filed' is greater than zero.                                                                                                |
|           |                                                                                                         | iv. This field is non-editable and 'Designated partner' shall be prefilled in it.                                                                                                                                                                                                                      |
| 3 (d)     | In case of change in designation to Designated Partner, DPIN/ Incometax PAN/ Passport number of Partner | i. This field shall be displayed and mandatory in case value entered in field number 2 (a) i.e. 'Number of individual Designated Partner(s) for which this form is being filed' is greater than zero.                                                                                                  |
|           |                                                                                                         | ii. Enter DPIN/ Income-tax PAN/ Passport number of a partner associated with the filing LLP.                                                                                                                                                                                                           |
|           |                                                                                                         | iii. User can enter passport number in this field only in case the nationality of the partner is other than 'India'.                                                                                                                                                                                   |
| 3 (e)     | Designated Partner Identification Number (DPIN)                                                         | i. This field shall be displayed and mandatory in case value entered in field number 2 (a) i.e. 'Number of individual Designated Partner(s) for which this form is being filed' is greater than zero.                                                                                                  |
|           |                                                                                                         | ii. In case 'Cessation' is selected in field number 3 (a) i.e. 'The form is being filed for' then this field shall be prefilled and non-editable based on LLPIN/ CIN/ FCRN/ FLLPIN/ other identification number. This field shall be an open text box for other cases.                                 |
|           |                                                                                                         | iii. In case 'DIN' is entered in field number 3 (d) i.e. 'In case of change in designation to Designated Partner, DPIN/ Income-tax PAN/ Passport number of Partner', it shall be same as in this field.<br>In case appointment/Change in designation selected, Entered DIN shall be in approved status |
|           | Name                                                                                                    | iv. DIN entered in repetitive blocks of DP/ Partner (including nominee of body corporate as DP/ Partner) should be unique.'                                                                                                                                                                            |
| 3 (f)     | Whether resident of India                                                                               | i. This field shall be displayed and mandatory in case value entered in field number 2 (a) i.e. 'Number of                                                                                                                                                                                             |
|           |                                                                                                         | ii.                                                                                                                                                                                                                                                                                                    |



Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                               | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 (g)     |                                                                                                          | individual Designated Partner(s) for which this form is being filed' is greater than zero.<br>Both of these fields 'Name' and 'Whether resident of India' shall be prefilled based on Designated Partner Identification Number (DPIN) entered in field number 3 (e) i.e. 'Designated Partner Identification Number (DPIN)'.                                                                                                                                                               |
|           |                                                                                                          | iii. In case the displayed residential status needs to be updated or the residential status is not displayed, you are required to file Form DIR-6 on MCA21 portal for updating the residential status of the Designated Partner before filing this webform.                                                                                                                                                                                                                               |
| 4         | Details of bodies corporate and their nominees as Designated Partners for which this form is being filed | i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as designated partners for which this form is being filed' is greater than zero.                                                                                                                                                                                                                                                           |
| 4 (a)     | This form is being filed for                                                                             | ii. Select the purpose for which form is being filed from the checkbox options provided.<br>iii. If the form is filed as a linked form to LLP Form No. 3, only 'Appointment' OR 'Cessation' can be selected from the options provided under this field.<br>iv. If the form is being filed on standalone basis values other than 'Appointment' or 'Cessation' can be selected in the given field.<br>v. 'Change in nominee' and 'Change in designation' cannot be selected simultaneously. |
| 4 (c)     | Type of body corporate                                                                                   | i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as Designated partners for which this form is being filed' is greater than zero.                                                                                                                                                                                                                                                           |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                                                                                                                                                                              | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 (d)     | 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 | <p>ii. In case option 5 i.e. 'Change in address of body corporate' OR option 6 i.e. 'Change in name of body corporate' is selected in field number 4 (a) i.e. 'This form is being filed for' then only the following options can be selected from the dropdown provided under this field:</p> <p><input type="checkbox"/> "LLP Incorporated outside India (LIOI)"</p> <p><input type="checkbox"/> "Company Incorporated outside India (CIOI)"</p> <p>i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as Designated partners for which this form is being filed' is greater than zero.</p> <p>ii. In case the body corporate is a company or a foreign company, enter the Corporate Identity Number (CIN) or Foreign Company Registration Number (FCRN), respectively. In case body corporate is a LLP or foreign LLP, enter the Limited Liability Partnership Identification Number (LLPIN) or Foreign Limited Liability Partnership Identification Number (FLLPIN), respectively.</p> <p>iii. Should be a valid and active CIN/ LLPIN/ FCRN/ FLLPIN based on selection in field number 4 (c) i.e. 'Type of body corporate'.</p> <p>iv. Value entered in repetitive block of bodies corporate as DPs and block of body corporate as partners should be unique.</p> <p>v. Body corporate should be associated to LLP in cases other than appointment.</p> |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-----------|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 (e)     | Name of body corporate                    | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as Designated partners for which this form is being filed' is greater than zero.</li> <li>ii. Name of the body corporate shall be prefilled based on LLPIN/ CIN/ FCRN/ FLLPIN entered in field number 4 (d) i.e. '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' and the user shall not be allowed to edit this field.</li> <li>iii. In case the field is not prefilled the user shall manually enter the details.</li> </ul> |
| 4         | Proof of change in Name of body corporate | <ul style="list-style-type: none"> <li>i. This attachment field shall be mandatory in case the name of body corporate has been changed.</li> <li>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 4 (f)     | Country where registered                  | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as Designated partners for which this form is being filed' is greater than zero.</li> <li>ii. This field shall be prefilled based on LLPIN/ CIN/ FCRN/ FLLPIN entered in field number 4 (d) i.e. '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'.</li> </ul>                                                                                                                                                                  |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                            | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|           |                                                                                       | <p>iii. India cannot be selected in case option 5 i.e. 'LLP Incorporated outside India (LIOI)' or option 6 i.e. 'Company Incorporated outside India (CIOI)' is selected in field number 4 (c) i.e. 'Type of body corporate'.</p> <p>iv. In case the displayed residential status needs to be updated or the residential status is not displayed, you are required to file Form DIR-6 on MCA21 portal for updating the residential status of the DP before filing this webform.</p>                                                                                                                                                                                                                                                                                                                                                                                                              |
| 4         | Proof of change in address of body corporate                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|           | Previous name, address of the body corporate                                          | <p>i. This attachment field shall be mandatory in case the address of body corporate has been changed.</p> <p>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 4 (j)     | Name and particulars of the person signing on behalf of the body corporate as nominee | In case of change in name and/ or address of the body corporate, enter the previous name and/ or address of the body corporate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 4 (k)     | DPIN                                                                                  | <p>i. This field shall be displayed and mandatory in case value entered in field number 2 (b) i.e. 'Number of bodies corporate and their nominees as Designated partners for which this form is being filed' is greater than zero.</p> <p>ii. In case 'Cessation' or 'Change in designation' is selected in field number 4 (a) i.e. 'The form is being filed for' then this field shall be prefilled based on LLPIN/ CIN/ FCRN/ FLLPIN/ other identification number. This field shall be an open text box for all other cases. iii. In case 'Change in designation' is selected in field number 4 (a) i.e. 'The form is being filed for' and 'DIN' of the nominee exists against the body corporate then the same DIN shall be provided under this field.</p> <p>iv. DIN entered in repetitive blocks of DP/ partner (including nominee of body corporate as DP/ partner) should be unique.</p> |
|           | Name                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|           | Whether resident of India                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                      | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4 (l)     | DPIN/ PAN/ Passport number of the previous nominee                              | Both the fields 'Name' and 'Whether resident of India' shall be prefilled based on DPIN entered in field number 4 (k) i.e. 'DPIN'.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 4 (m)     |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 4 (p)     | Name of the previous nominee                                                    | Both the fields 'DPIN/ PAN/ Passport number of the previous nominee' and 'Name of the previous nominee' shall be prefilled based on CIN/ LLPIN/ FCRN/ FLLPIN or any other identification number.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 4 (q)     |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 5         | Details of individual partner(s) for which this form is being filed             | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (c) i.e. 'Number of individual partner(s) for which this form is being filed' is greater than zero.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 5 (a)     | The form is being filed for                                                     | <ul style="list-style-type: none"> <li>ii. Select the purpose for which form is being filed from the checkbox options provided.</li> <li>iii.</li> <li>iv. If the form is filed as a linked form to LLP Form No. 3, only 'Appointment' OR 'Cessation' can be selected from the options provided under this field.<br/>If the form is being filed on standalone basis values other than 'Appointment' or 'Cessation' can be selected in the given field.</li> </ul>                                                                                                                                                                                                                                                                        |
| 5 (d)     | Income tax permanent account number (Income-tax PAN) or Passport Number or DPIN | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (c) i.e. 'Number of individual partner(s) for which this form is being filed' is greater than zero.</li> <li>ii. Select the relevant option from the radio button provided under this field.</li> <li>iii. DPIN shall not be allowed to be selected in case option 3 i.e. 'Change in name of partner' or option 5 i.e. 'Change in address' is selected in field number 5 (a) i.e. 'The form is being filed for'.</li> <li>iv. In case option 4 i.e. "Change in designation" is selected in field number 5 (a) i.e. 'The form is being filed for', the user can only select "DPIN" in this field.</li> </ul> |
|           | Name of partner                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|           | First Name                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                    | Instructions                                                                                                                                                                                                                                 |
|-----------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5 (e)     | Middle Name                                                                                   | i. This field shall be displayed and mandatory in case value entered in field number 2 (c) i.e. 'Number of individual partner(s) for which this form is being filed' is greater than zero.                                                   |
|           | Last Name                                                                                     | ii. This field shall be prefilled based on DPIN entered in field number 5 (a) i.e. 'The form is being filed for'. In case of Indian citizen, the user shall not be allowed to enter single alphabet in his/her first name field.             |
|           | Proof of change in Name of partner                                                            | iv. Either first name or last name of the partner is mandatory.<br>v. Name of the partner shall be verified based on PAN.                                                                                                                    |
| 5         |                                                                                               | i. This attachment field shall be mandatory 'Change in name of partner' is selected in field number 5 (a) i.e. 'The form is being filed for'<br>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.                   |
| 5 (f)     | Father's Name                                                                                 | i. These fields shall be prefilled based on the DPIN incase provided in previous fields.                                                                                                                                                     |
|           | First Name                                                                                    | ii. In case of Indian citizen, the user shall not be allowed to enter single alphabet in father's first or last name field.                                                                                                                  |
|           | Middle Name                                                                                   | iii. Either of the two fields out of First and Last name are mandatory.                                                                                                                                                                      |
|           | Last Name                                                                                     | iv. In case the displayed residential status needs to be updated or the residential status is not displayed, you are required to file Form DIR-6 on MCA21 portal for updating the residential status of the partner before filing this Form. |
| 5         | Proof of change in permanent residential address                                              | i. It is mandatory for the user to attach a proof of change in permanent address in case permanent address of the partner has been changed.                                                                                                  |
|           | Details of bodies corporate as partners and their nominees for which this form is being filed | ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.                                                                                                                                                                   |
| 6         |                                                                                               | i. This field shall be displayed and mandatory in case value entered in field number 2 (d) i.e. 'Number of bodies corporate as partners and their nominees for which this form is being filed' is greater than zero.                         |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                        | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6 (a)     | The form is being filed for                                       | <ul style="list-style-type: none"> <li>ii. Select the purpose for which form is being filed from the checkbox options provided.</li> <li>iii. If the form is filed as a linked form to LLP Form No. 3, only 'Appointment' OR 'Cessation' can be selected from the options provided under this field.</li> <li>iv. If the form is being filed on standalone basis values other than 'Appointment' or 'Cessation' can be selected in the given field.</li> <li>v. 'Change in nominee' and 'Change in designation' cannot be selected simultaneously.</li> </ul>                                                                                               |
| 6 (c)     | Type of body corporate                                            | Select the relevant Body corporate for which the form is being file for from the options provided in the dropdown.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 6 (d)     | CIN or FCRN or LLPIN or FLLPIN or any other identification number | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (d) i.e. 'Number of bodies corporate as partners and their nominees for which this form is being filed' is greater than zero. ii. In case the body corporate is a company or a foreign company, enter the Corporate Identity Number (CIN) or Foreign Company Registration Number (FCRN) respectively. In case body corporate is a LLP or foreign LLP, enter the Limited Liability Partnership Identification Number (LLPIN) or Foreign Limited Liability Partnership Identification Number (FLLPIN), respectively.</li> </ul> |
|           |                                                                   | <ul style="list-style-type: none"> <li>iii. Should be a valid and active CIN/ LLPIN/ FCRN/ FLLPIN based on selection in field number 6 (c) i.e. 'Type of body corporate'.</li> <li>iv. Value entered in repetitive block of bodies corporate as DPs and block of body corporate as partners should be unique.</li> <li>v. Body corporate should be associated to LLP in cases other than appointment.</li> </ul>                                                                                                                                                                                                                                            |
| 6 (e)     | Name of body corporate                                            | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (d) i.e. 'Number of bodies corporate as partners and their nominees for which this form is being filed' is greater than zero.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                      |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                            | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-----------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6         | Proof of change in Name of body corporate<br>Country where registered                 | <ul style="list-style-type: none"> <li>ii. Name of the body corporate shall be prefilled based on LLPIN/ CIN/ FCRN/ FLLPIN entered in field number 6 (d) i.e. 'CIN or FCRN or LLPIN or FLLPIN or any other identification number'.</li> <li>i. This attachment field shall be mandatory in case the name of body corporate has been changed.</li> <li>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 6 (f)     |                                                                                       | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (d) i.e. 'Number of bodies corporate as partners and their nominees for which this form is being filed' is greater than zero.</li> <li>ii. This field shall be prefilled based on LLPIN/ CIN/ FCRN/ FLLPIN entered in field number 6 (d).</li> <li>iii. India cannot be selected in case option 5 i.e. 'LLP Incorporated outside India (LIOI)' or option 6 i.e. 'Company Incorporated outside India (CIOI)' is selected in field number 6 (c) i.e. 'Type of body corporate'.</li> <li>iv. In case the displayed residential status needs to be updated or the residential status is not displayed, you are required to file Form DIR-6 on MCA21 portal for updating the residential status of the partner before filing this webform.</li> </ul> |
| 6         | Proof of change in address of body corporate                                          | <ul style="list-style-type: none"> <li>i. This attachment field shall be mandatory in case the address of body corporate has been changed.</li> <li>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</li> <li>iii. The user is allowed to attach only a single file under this attachment field.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 6 (k)     | Name and particulars of the person signing on behalf of the body corporate as nominee | <ul style="list-style-type: none"> <li>i. This field shall be displayed and mandatory in case value entered in field number 2 (d) i.e. 'Number of bodies corporate as partners and their nominees for which this form is being filed' is greater than zero.</li> <li>ii. 'DPIN' cannot be selected in case the form is being filed for 'Change in nominee' or 'Change in name of nominee' or 'Change in address of the nominee'.</li> <li>iii. In case the form is being filed for 'Change in designation', then only 'DPIN' can be selected.</li> </ul>                                                                                                                                                                                                                                                                                                                       |
| 6 (l)     | Income-tax PAN/ passport number/ DPIN                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |



Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                            | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-----------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6         | Verify income-tax PAN/ Pre-Fill       | <ul style="list-style-type: none"> <li>iv. Passport number shall be allowed to be selected only in case nationality of the nominee is other than 'India'.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 6         | Proof of change in name of nominee    | <ul style="list-style-type: none"> <li>i. In case of 'Appointment', 'Change in nominee', 'Change in name of nominee' and in case PAN is provided, it shall be mandatory for the user to click on 'Verify income-tax PAN/Pre-Fill' button for verification of details.</li> <li>ii. Applicant's name (first, middle and last name), applicant father's name (first, middle and last name) and date of birth shall be verified as per income-tax PAN details.</li> </ul>                                                                                                                                |
| 6         | Proof of change in address of nominee | <ul style="list-style-type: none"> <li>i. This attachment field shall be mandatory in case the of name of nominee has been changed.</li> <li>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</li> <li>iii. The user is allowed to attach only a single file under this attachment field.</li> </ul>                                                                                                                                                                                                                                                                        |
| 6 (w)     | Whether resident of India             | <ul style="list-style-type: none"> <li>i. This attachment field shall be mandatory in case the of address of nominee has been changed.</li> <li>ii. The attachment shall be either in PDF or .jpeg/.jpg format up to 2 MB.</li> <li>iii. The user is allowed to attach only a single file under this attachment field.</li> </ul>                                                                                                                                                                                                                                                                     |
|           | Attachments                           | <ul style="list-style-type: none"> <li>i. If DPIN is provided by the user previously, then this field shall be prefilled based on the DPIN details.</li> <li>ii. In case 'DPIN' is provided and this detail does not exist in the MCA database with respect to the DPIN, filing of this webform shall not be allowed.</li> <li>iii. In case the displayed residential status needs to be updated or the residential status is not displayed, you are required to file Form DIR-6 on MCA21 portal for updating the residential status of the Designated Partner before filing this webform.</li> </ul> |
|           |                                       | <ul style="list-style-type: none"> <li>i. The user is required to provide the attachments in both .PDF and excel format.</li> <li>ii. All the attachments shall be up to 2 MB.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                             |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                                                                                                                                                                                                                                                                                                                             | Instructions                                                                                                                                                                                                                                                                                                                                                                                     |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|           | Consent to become a partner/ Designated Partner                                                                                                                                                                                                                                                                                                        | <ul style="list-style-type: none"> <li>i. This attachment shall be mandatory in case the form is being filed for 'Appointment'.</li> <li>ii. The user is required to upload a signed PDF as consent document.</li> </ul>                                                                                                                                                                         |
|           | Related Entity Details                                                                                                                                                                                                                                                                                                                                 | This attachment shall be mandatory in case the form is being filed for 'Appointment'.                                                                                                                                                                                                                                                                                                            |
|           | Evidence of cessation                                                                                                                                                                                                                                                                                                                                  | This attachment shall be mandatory in case the form is being filed for 'Cessation'.                                                                                                                                                                                                                                                                                                              |
|           | 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 letterhead mentioning the name and address of an individual nominated to act as nominee/ Designated Partner on its behalf. | for ' attachment shall be mandatory in case the form is being filed applicable in case of Appointment of Body Corporate'.                                                                                                                                                                                                                                                                        |
|           | Optional attachment(s) - if any                                                                                                                                                                                                                                                                                                                        | <ul style="list-style-type: none"> <li>i. This field can be used to provide any other information.</li> <li>ii. Please note that the user has an option to upload up to five optional attachments.</li> </ul>                                                                                                                                                                                    |
|           | <b>To be digitally signed by a Designated Partner:</b><br>DPIN of the Designated Partner                                                                                                                                                                                                                                                               | <ul style="list-style-type: none"> <li>i. Webform should be digitally signed by Designated Partner of LLP. In case the webform is filed for cessation of partner/ Designated Partner, the person signing the form should be different from the person in whose respect the form is being filed.</li> <li>ii. Enter a valid Designated Partner Identification Number (DPIN) of the DP.</li> </ul> |
|           | <b>Certificate by practicing professional</b> Signature field 2                                                                                                                                                                                                                                                                                        | <ul style="list-style-type: none"> <li>i. The webform shall be certified by a chartered accountant (in whole-time practice) or cost accountant (in whole-time practice) or company secretary (in whole-time practice) by digitally signing the webform.</li> </ul>                                                                                                                               |
|           | Whether associate or fellow                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                  |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Field No. | Field Name                                          | Instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-----------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|           | Membership number or certificate of practice number | <ul style="list-style-type: none"> <li>ii. Select the relevant category of the professional and whether he/she is an associate or fellow.</li> <li>iii. In case the professional is a chartered accountant (in wholetime practice) or cost accountant (in whole-time practice), enter the membership number.</li> <li>iv. In case the practicing professional is a company secretary (in whole-time practice), enter the certificate of practice number.</li> </ul> |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

### 3.2 Other instructions to fill ‘LLP Form No. 4’

| Buttons                | Particulars                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div>Choose File</div> | <p>i. Click the ‘Choose File’ button to browse and select a document that is required to be attached as a supporting to LLP Form No. 4. ii. This is an optional field.</p> <p>iii. All the attachments should be uploaded in <b>PDF or .jpg format</b> up to 2 MB.</p> <p>iv. The user has an option to attach multiple files as attachments within the form.</p>                                                                                                                                                                                            |
| <div>Remove</div>      | <p>The user has an option to remove files from the attachment section using the “Remove” option provided against each attachment.</p>                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <div>Download</div>    | <p>The user has an option to download the attached file(s) using the “Download” option provided against each attachment.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <div>Save</div>        | <p>i. Click on Save button for saving the application in a draft form at any given point in time prior to submitting the webform.</p> <p>ii. The ‘Save’ option will be enabled only after entering the ‘<b>LLPIN</b>’. This</p> <p>iii. is an optional field.</p> <p>iv. On saving the webform, all the information filled in the webform will be saved and can be edited/updated till the time webform is submitted. The</p> <p>v. previously saved drafts can also be accessed (at a later point in time) using the application history functionality.</p> |
| <div>Submit</div>      | <p>i. This is a mandatory field.</p> <p>ii. When the user clicks on the submit button the details filled in the webforms</p> <p>iii. are auto saved and the system verifies all the webforms (LLP Form No. 3, 4 and 5), incase errors are detected the user will be taken back to webform and all the relevant error messages shall be displayed.</p> <p>In case at the submission of webforms no errors are detected by the system the submission will be successful.</p>                                                                                   |

## 4 PART IV – KEY POINTS FOR SUCCESSFUL SUBMISSION

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

#### 4.1 Fee rules

| S# | Purpose of webform                                                                                                                                           | Normal Fee          | Additional (Delay Fee) | Logic for Additional Fees |                                    |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------|---------------------------|------------------------------------|
|    |                                                                                                                                                              |                     |                        | Event Date                | Time limit (days) for filing       |
| 1  | Notice of appointment, cessation, change in name/ address/designation of a Designated Partner or partner and consent to become a Partner/ Designated Partner | Refer Table 1 below | Refer Table 2          | Date of Event             | 30 days from the date of the event |

*Fee payable is subject to changes in pursuance of the Act, or any rule or regulation made, or notification issued thereunder.*

Table 1

| S# | Small LLPs/Other than Small LLPs | Fee applicable (INR) |
|----|----------------------------------|----------------------|
| 1  | For Small LLPs                   | 50                   |
| 2  | For Other than Small LLPs        | 150                  |

Table 2

Additional Fees in case of delay in filing of forms

| Sl. No. | Period of delay                     | Additional fee payable for Small LLPs<br>(in Rs.) | Additional fee payable for Other than Small LLPs<br>(in Rs.) |
|---------|-------------------------------------|---------------------------------------------------|--------------------------------------------------------------|
| 1       | Up to 15 days                       | 1 times of normal filing fees                     | 1 times of normal filing fees                                |
| 2       | More than 15 days and up to 30 days | 2 times of normal filing fees                     | 4 times of normal filing fees                                |
| 3       | More than 30 days and up to 60 days | 4 times of normal filing fees                     | 8 times of normal filing fees                                |

Instruction Kit for LLP Form No. 4  
(Notice of appointment, cessation, change in name/  
address/designation of a Designated Partner or Partner and  
consent to become a Partner/Designated Partner)

| Sl. No. | Period of delay                          | Additional fee payable for Small<br>LLPs<br>(in Rs.) | Additional fee payable for Other<br>than Small LLPs<br>(in Rs.) |
|---------|------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------|
| 4       | More than 60 days and<br>up to 90 days   | 6 times of normal filing fees                        | 12 times of normal filing fees                                  |
| 5       | More than 90 days and<br>up to 180 days  | 10 times of normal filing fees                       | 20 times of normal filing fees                                  |
| 6       | More than 180 days<br>and up to 360 days | 15 times of normal filing fees                       | 30 times of normal filing fees                                  |
| 7       | Beyond 360 days                          | 25 times of normal filing fees                       | 50 times of normal filing fees                                  |

Refer section [2\(1\)\(ta\)](#) of The Limited Liability Partnership Act, 2008 for definition of Small LLP.

#### 4.2 Processing Type

##### Conditional STP:

- If filed independency: Form will get processed under STP mode.
- If filed with 'Change in business activity check box in field no. 17[alone or in combination with any other purpose] of Form 3', Form will get processed under Non-STP
- If filed without selecting Change in business activity check box in field no. 17 of Form 3, Form will get processed under STP.

#### 4.3 Useful links

- Link to access LLP Form No. 4: <https://www.mca.gov.in/MinistryV2/llpformsdownload.html>
- FAQs related to e-filing: <https://www.mca.gov.in/MinistryV2/efiling.html>
- Payment and Fee related Services: <https://www.mca.gov.in/MinistryV2/paymentservices.html>