

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIP.US LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida

Please return all correspondence concerning this matter to the following:

Todd Lantor
Name of Person

Lukas, LaFuria, Gutierrez & Sachs, LLP
Firm/Company

8300 Greensboro Drive, Suite 1200
Address

Tysons, VA 22102
City/State and Zip Code

tlantor@fcclaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd Lantor at (703) 584-8671
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SIP.US LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 45-5388582
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. May 13, 2012 (as a domestic Florida limited liability company pursuant to Doc. No. L12000072404)
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3005 Royal Blvd. South, Suite 120 Same as street address.
(Street Address of Principal Office) (Mailing Address)

Alpharetta, GA 30022

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(City) (Zip code)

FILED
19 JUL 22 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Vincent Rojo on behalf of InCorp Services, Inc.
(Registered agent's signature)

FILED
19 JUL 22 PM 3:13
RECORDS SECTION
STATE OF FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: Jesse Klein

Member Address: c/o Thompson Street Partners,

Authorized 120 S. Central Ave., Suite 600

Person St. Louis, MO 63105-1794

Other _____ Other _____

Manager Name: John P. Cunningham

Member Address: 14 Eckert Farm Road

Authorized Saddle River, NJ 07458-2522

Person _____

Other _____ Other _____

Manager Name: Geoffrey Bloss

Member Address: c/o BCM One, Inc.

Authorized 521 Fifth Ave., 14th Floor

Person New York, NY 10175-1200

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Brian R. Kornmann

Member Address: c/o Thompson Street Partne

Authorized 120 S. Central Ave., Suite 600

Person St. Louis, MO 63105-1794

Other _____ Other _____

Manager Name: Francis X. Ahearn, Jr.

Member Address: 2508 Mizner Lake Court

Authorized Wellington, FL 33414-7030

Person _____

Other _____ Other _____

Manager Name: Andrew Stewart

Member Address: c/o Thompson Street Partne

Authorized 120 S. Central Ave., Suite 600

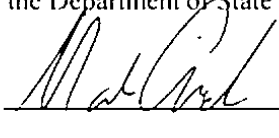
Person St. Louis, MO 63105-1794

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

Mark Amick

Typed or printed name of signee

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIP.US LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIP.US LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



7270235 8300

SR# 20195513385

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203052621

Date: 06-19-19