

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000007298

Entity Name: SIP.US LLC

Current Principal Place of Business:

3005 ROYAL BLVD S, STE 120
APLHARETTA, GA 30022

Current Mailing Address:

3005 ROYAL BLVD S, STE 120
APLHARETTA, GA 30022 US

FEI Number: 45-5388582

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH CT N
LOXAHATCHEE, FL 33470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name KLEIN, JESSE
Address 120 S CENTRAL AVE, STE 600
C/O THOMPSON STREET PARTNERS

Title MGR
Name KORNMANN, BRIAN R
Address 120 S CENTRAL AVE, STE 600
C/O THOMPSON STREET PARTNERS

City-State-Zip: ST LOUIS MO 63105-1794

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Title MGR
Name CUNNINGHAM, JOHN P
Address 14 ECKERT FARM RD
City-State-Zip: SADDLE RIVER NJ 07458-2522

Title MGR
Name AHEARN, JR, FRANCIS X
Address 2508 MIZNER LAKE COURT
City-State-Zip: WELLINGTON FL 33414-7030

Title MGR
Name BLOSS, GEOFFREY
Address 521 FIFTH AVE, 14TH FLOOR
C/O BCM ONE, INC.
City-State-Zip: NEW YORK NY 10175-1200

Title MGR
Name STEWART, ANDREW
Address 120 S CENTRAL AVE, STE 600
C/O THOMPSON STREET PARTNERS
City-State-Zip: ST LOUIS MO 63105-1794

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEOFFREY BLOSS

CEO

02/06/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date