

**2022 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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**FILED**  
**Jan 06, 2022**  
**Secretary of State**  
**8799957881CC**

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

Title MGR, PRESIDENT, SECRETARY  
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, CEO  
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

Title MGR, VP  
Name DUNN, ROBERT C  
Address 3005 ROYAL BLVD S, STE 120  
City-State-Zip: APLHARETTA GA 30022

Title CFO  
Name FECHTER, DOUGLAS  
Address 3005 ROYAL BLVD S, STE 120  
City-State-Zip: APLHARETTA GA 30022

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*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: DOUGLAS FECHTER

CFO

01/06/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title COO  
Name AMICK, MARK  
Address 3005 ROYAL BLVD S, STE 120  
City-State-Zip: APLHARETTA GA 30022

Title TREASURER  
Name BOROW, ELIZABETH R  
Address 3005 ROYAL BLVD S, STE 120  
City-State-Zip: APLHARETTA GA 30022