# M23000011490

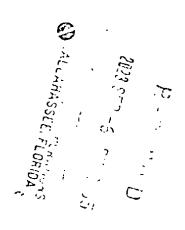
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	<del></del>
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



800415231458

2023 SEP -6 PH 3: 30



### **CT CORP**

#### (850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

09/06/2023

D	ate:	09/06/2023	- w: DW
		Acc#I20160000072	an: Cook
Name:	BlueOval S	SK, LLC	
Document #:			
Order #:	15110392		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of		Country of Dostination	
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified Plain: COGS:	d: 🗸	Email Address for Annual Report Notifica
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount	:\$ 155.00	

Thank you!

#### **COVER LETTER**

BlueOval SK, LLC SUBJECT:		
	ne of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability existence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Flor	
lease return all correspondence concerning this matter	to the following:	
Jiem Cranney		
	Name of Person	
BlueOval SK, LLC		
	Firm/Company	
	Timecompany	
1 American Road, Suite 120		
	Address	
Dearborn, Michigan 48126		
	City/State and Zip Code	
jcranney@blucovalsk.com		
E-mail address: (to b	oe used for future annual report notification)	
or further information concerning this matter, please ca	all:	
Jiem Cranney	313 410-4629	
Name of Contact Person	at ()	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  \$125.00 Filing Fee  \$130.00 Filing Fee		

## 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: BlueOval SK, 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.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty hability) 1 American Road, Suite 120 1 American Road, Suite 120 (Mailing Address) (Street Address of Principal Office) Dearborn, Michigan 48126 Dearborn, Michigan 48126 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation . 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. Laura Droderick C T Corporation System

(Registered agent's signature)

Leura Broderick

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:	Title or Capacity:	Name and Address:
■Manager	Name:	■ Manager	Name: Jun Yong (Timothy) Jeong
□Member	Address: 1 American Road, Suite 120	□Member	Address: 1 American Road, Suite 120
□Authorized	Dearborn, Michigan 48126	□Authorized	Dearborn, Michigan 48126
Person		Person	
Other	Other	Other	Other
■Manager	Jonathan Park Name:	■Manager	Name:
	Address: 1 American Road, Suite 120	□Member	Address: i American Road, Suite 120
□Authorized	Dearborn, Michigan 48126	□Authorized	Dearborn, Michigan 48126
Person	· · · · · · · · · · · · · · · · · · ·	Person	
Other	Other	Other	Other
■Manager	Name:	• Manager	Name: Venkateswara (Anand) Sankaran
☐ Member	Address:1 American Road, Suite 120	□Member	Address: 1 American Road, Suite 120
□Authorized	Dearborn, Michigan 48126	□Authorized	Dearborn, Michigan 48126
Person		Person	
□Other	Other	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.

Docusigned by:		
19CA2DC274984CA	Signature of an authorized person	,_
Jiem Cranney, Chief Fin	ancial Officer	
-	Tuned as arinted name of singer	_

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLUEOVAL SK, 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 SIXTH DAY OF SEPTEMBER, A.D. 2023.

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

6363018 8300 SR# 20233426207 Authentication: 204102088

Date: 09-06-23