

Secretary of State Application for Registration Foreign Limited Partnership (LP)

LP-5

For Office Use Only -FILED-

File No.: 202464601531 Date Filed: 11/8/2024

Foreign Certificate of Good Standing is required.

Processing Fee: \$0 - The processing fee is waived for submissions submitted July 1, 2022 - June 30, 2023.

Certification Fee (Optional) - \$5.00

Note: The annual minimum \$800 tax to the California Franchise Ta remains due and is not subject to the processing fee waiver. For m go to ftb.ca.gov.		Above Space	For Office	Use Only	
1. Name of Foreign LP (Only enter an alternate name if the foreign L	P name in Item 1a is no	t available in CA.)			
1a. Enter the Exact Name of the Foreign LP (as listed on the Certificate of Good Standing.)	1b. Enter the After	1b. Enter the Alternate Name to be Used in California, if required.			
Sapphire Sport Parallel Fund II, L.P.					
2. LP Jurisdiction (Ensure that the jurisdiction matches the attached	Certificate of Good Sta	nding.)			
Jurisdiction (State, foreign country or place where this LP is formed.)					
Del	aware				
3. Business Addresses (Enter the complete business addresses.	items 3a and 3b cannot	t be a P.O. Box or "in car	e of" an ind	ividual or entity.)	
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviatio	City (no abbreviations)		Zip Code	
556 Santa Cruz Avenue	Menlo Park	Menlo Park		94025	
b. Mailing Address of Principal Office, if different than item 3a	City (no abbreviation	City (no abbreviations)		Zip Code	
c. Address of required office in Jurisdiction of Formation, if any	City (no abbreviation	City (no abbreviations)		Zip Code	
4. Service of Process (Must provide either Individual OR Corporation	on.)			<u> </u>	
INDIVIDUAL Complete Items 4a and 4b only. Must include agent's fu	ılı name and California	street address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Middle Name Last Name		Suffix	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviatio	City (no abbreviations)		Zip Code	
CORPORATION - Complete Item 4c only. Only include the name of the				<u> </u>	
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do r					
CORPORATION SERVICE COMPANY WHICH WILL DO BUSINESS IN	CALIFORNIA AS CSC	- LAWYERS INCORPO	RATING S	ERVICE	
5. General Partners (Enter the name and addresses of all the General	ai Partners. Attach addi	tional pages, if necessar	y.)		
5a, General Partner's Name Sapphire Sport GPE II, L.P.					
5b. General Partner's Address	City (no abbreviatio	City (no abbreviations)		Zip Code	
556 Santa Cruz Avenue	Menlo Park	Menlo Park		94025	
6. Foreign Limited Liability Limited Partnership (Check this	box only if applicable)				
Check this box if the foreign limited partnership is a foreign limited	ed liability limited part	Inership.			
All attachments are part of this document. I declare that I am deed. I further declare the information is true and correct, and			, which is	my act and	
Ma Man	Nino Marakovio	c, as Managing Member ort GPE II, L.P., GP of S	of Sapphire apphire Spc	Sport (MGP), LL0 ort Parallel Fund II	
General Partner's Signature	Type or F	Print Name			
LP-5 (REV 02/2023)			2023 Califor	nia Secretary of State	

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "SAPPHIRE SPORT PARALLEL FUND II, L.P."

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAPPHIRE SPORT PARALLEL FUND II, L.P." WAS FORMED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2021.

THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF NOVEMBER, A.D. 2024.

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

Authentication: 204831751

Date: 11-08-24

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