



**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

**LLC-12**

**22-B44412**

**FILED**

In the office of the Secretary of State  
of the State of California

**MAR 07, 2022**

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**IMPORTANT** — This form can be filed online at  
[bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).

[Read instructions](#) before completing this form.

**Filing Fee - \$20.00**

**Copy Fees** - First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00 plus copy fees

**1. Limited Liability Company Name** (Enter the **exact** name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

APPLOVIN GAMES, LLC

**2. 12-Digit Secretary of State Entity Number**

202010710667

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

DELAWARE

**4. Business Addresses**

| a. Street Address of Principal Office - Do not list a P.O. Box   | City (no abbreviations) | State     | Zip Code |
|--|-------------------------|-----------|----------|
| 1100 Page Mill Road  | Palo Alto               | CA        | 94304    |
| b. Mailing Address of LLC, if different than item 4a   | City (no abbreviations) | State     | Zip Code |
| 1100 Page Mill Road  | Palo Alto               | CA        | 94304    |
| c. Street Address of <b>California</b> Office, if Item 4a is not in California<br>Do not list a P.O. Box | City (no abbreviations) | State     | Zip Code |
| 1100 Page Mill Road  | Palo Alto               | <b>CA</b> | 94304    |

**5. Manager(s) or Member(s)**

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on [Form LLC-12A](#).

| a. First Name, if an individual - Do not complete Item 5b | Middle Name             | Last Name | Suffix   |
|---|-------------------------|-----------|----------|
| Herald  |                         | Chen      |          |
| b. Entity Name - Do not complete Item 5a                  |                         |           |          |
|   |                         |           |          |
| c. Address  | City (no abbreviations) | State     | Zip Code |
| 1100 Page Mill Road                                       | Palo Alto               | CA        | 94304    |

**6. Service of Process** (Must provide either Individual **OR** Corporation.)

**INDIVIDUAL** – Complete Items 6a and 6b only. Must include agent's full name and California street address.

|   |                         |                    |          |
|---|-------------------------|--------------------|----------|
| a. California Agent's First Name (if agent is <b>not</b> a corporation)                   | Middle Name             | Last Name          | Suffix   |
| b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> | City (no abbreviations) | State<br><b>CA</b> | Zip Code |

**CORPORATION** – Complete Item 6c only. Only include the name of the registered agent Corporation.

|   |
|---|
| c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b<br>UNITED AGENT GROUP INC. (C3886943) |
|---|

**7. Type of Business**

|   |
|---|
| Describe the type of business or services of the Limited Liability Company<br>all lawful purposes |
|---|

**8. Chief Executive Officer, if elected or appointed**

|               |                         |           |          |
|---------------|-------------------------|-----------|----------|
| a. First Name | Middle Name             | Last Name | Suffix   |
| b. Address    | City (no abbreviations) | State     | Zip Code |

**9. Labor Judgment**

|  |   |
|--|---|
| Does a Manager or Member have an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|

**10.** By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

03/07/2022

Date

John Duemig

Type or Print Name

Special Manager

Title

Signature



**Attachment to  
Statement of Information  
(Limited Liability Company)**

**LLC-12A  
Attachment**

22-B44412

**A. Limited Liability Company Name**

APPLOVIN GAMES, LLC

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**B. 12-Digit Secretary of State File Number**

202010710667

**C. State or Place of Organization (only if formed outside of California)**

DELAWARE

**D. List of Additional Manager(s) or Member(s)** - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.

|                                |                                      |                         |                   |
|--------------------------------|--------------------------------------|-------------------------|-------------------|
| First Name<br>Victoria         | Middle Name                          | Last Name<br>Valenzuela | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address<br>1100 Page Mill Road | City (no abbreviations)<br>Palo Alto | State<br>CA             | Zip Code<br>94304 |
| First Name<br>Ritesh           | Middle Name                          | Last Name<br>Khanna     | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address<br>1100 Page Mill Road | City (no abbreviations)<br>Palo Alto | State<br>CA             | Zip Code<br>94304 |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |
| First Name                     | Middle Name                          | Last Name               | Suffix            |
| Entity Name                    |                                      |                         |                   |
| Address                        | City (no abbreviations)              | State                   | Zip Code          |