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(((H210000254163)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120080000045

Phone

: (302)645-7400

Fax Number : (302)645-1280

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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FOREIGN PROFIT/NONPROFIT CORPORATION Spendonly Inc.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Ι.	Spendonly Inc.			
	(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATED, Corp." "Inc.," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
	(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	siness in Florida)
2.	Delaware	3.	6-1417574	
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
4.	01/04/2021	5.		
	(Date of incorporation)		(Date of duration, if other than perpetual)	
б.				
		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	o Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7	17342 SW 136th	Ave, King City, OR 97224		
′·-			ce street address)	
•		(Current mailin	ng address, if different)	
	•			
8.	Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	* -
	Name:	Registered Agents Inc.		
		7901 4th Street N, Ste 300		10
Of	fice Address:			
		St. Petersburg	, Florida <u>33702</u>	. ::-
		(City)	(Zip code)	1. 7

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS				(((H21000025416 3)))				
□ Chairman	Name: Nelson ljih	□ Chairman	Name:	······································				
⊡Vice Chairman	Address: 17342 SW 136th Ave,	□Vice Chairman	Address:					
☑ Director	King City, OR 97224	□ Director						
□President		□President						
□Vice President		□Vice President						
⊠ Secretary	O Treasurer	Secretary		□Treasurer				
Other CEO	Other	□Other						
□ Chairman	Name:	□Ch a ìrman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□ Director		□ Director		· · · · · · · · · · · · · · · · · · ·				
□ President		President						
□Vice President		□Vice President						
□Secretary	□ Treasurer	☐ Secretary		□Tiessurer				
□Other	□Other	Other		□ Other				
□ Chairman	Name:	□ Chairmen	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□Director		Director						
☐ President		□President		<u> </u>				
□Vice President		□Vice President						
Secretary	□ Treasur es	Secretary		□Ттеазшег				
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 Aunual Report form. 12. Signature of Director or Officer								
12.	Signature of Direct	or or Officer						
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. Nelson Ijih, CEO								
(Typed or printed name and capacity of person signing application)								

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "SPENDONLY INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINETEENTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPENDONLY INC."

WAS INCORPORATED ON THE FOURTH DAY OF JANUARY, A.D. 2021.

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

Authentication: 202315771

Date: 01-19-21