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COVER LETTER

Proceedings	Corporations		
Spend SUBJECT:	US. Inc.		
50 b JEC1.	Name of corpo	oration - must include suffix	
Dear Sir or Madam:			
Ovidineate of L.USIC	cation by Foreign Corporation nce," or "Certificate of Goo eign corporation to transact h	on for Authorization to Trans d Standing" and check are su business in Florida.	sact Business in Florida," ubmitted to register the
Please return all corre Attn: Compliance	espondence concerning this i	matter to the following:	
Spend US, Inc	Name of Person		
120 W. 3rd St	Firm	/Company	
	Suite B		
Wayne, NE 68787	,	Address	
compliance@spend.com	City/St	ate and Zip code	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, ple		
osephine Potente 800 730-3194			
Name of Person	nc	Daryti shocke lep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Tallahassee, Fl		Tallahassee, F	L 32314
Enclosed is a check for	the following amount:		
3 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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. Spend US, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 83-1372839 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) 7/18/2018 (Date of duration, if other than perpetual) (Date of incorporation) N/A 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 120 W. 3rd St, Wayne, NE 68787 Suite B (Principal office address) SAME AS ABOVE (Current mailing address, if different) 8. 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 (City) (Zip code) 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. Melissa Nolan Mise Allan Assistant Secretary

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chase Zimmerman
Chairman: 120 W. 3rd St. Wayne, NE 68787
Address:
Suite B
Chase Zimmerman
νVice Chairman:
120 W. 3rd St. Wayne, NE 68787
Address:
Suite B
Chase Zimmerman
Director
120 W. 3rd St, Wayne, NE 68787
Address:
Suite BChase Zimmerman
Director:
Director: 120 W. 3rd St, Wayne. NE 68787
Address:
Suite B
B. OFFICERS Bryan Woods
President:
120 W. 3rd St. Wayne, NE 68787
Address:
Suite B
/ Bryan words
Vice President: 120 W. 3rd St. Wayne, NE 68787
720 17. 51d 51. 17 dylle, 142 06767
Address:
/ Suite B Bryan Woods
Secretary:
120 W. 3rd St, Wayne, NE 68787
Address: Suite B
Bryan Woods
Treasurer: 120 W. 3rd St. Wayne, NE 68787
Address: Suite B
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
and/or directors.
12. /1/2 C/2
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 begain
are true and that he of 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.
13 BRYAN C. (NOOD)
(Typed or point)



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

DELAWARE, DO HEREBY CERTIFY "SPEND US, 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 EIGHTEENTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPEND US, INC."

WAS INCORPORATED ON THE EIGHTEENTH DAY OF JULY, A.D. 2018.

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

e at corn delaware gov/auti

6979212 8300 SR# 20187216652 Authentication: 203640997

Date: 10-18-18