

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000963

Entity Name: BILL.COM, INC**Current Principal Place of Business:**1810 EMBARCADERO ROAD
PALO ALTO, CA 94303**Current Mailing Address:**1810 EMBARCADERO ROAD
PALO ALTO, CA 94303 US**FEI Number:** 20-4895317**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** KAREN E. ELLIOTT, ASSISTANT SECRETARY

02/27/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name LACERTE, RENE
Address 1810 EMBARCADERO ROAD
City-State-Zip: PALO ALTO CA 94303

Title CFO/TREASURER
Name RETTIG, JOHN
Address 1810 EMBARCADERO ROAD
City-State-Zip: PALO ALTO CA 94303

Title GENERAL COUNSEL/SECRETARY
Name AJI, RAJESH
Address 1810 EMBARCADERO ROAD
City-State-Zip: PALO ALTO CA 94303

Title CTO
Name CHAN, ERIC
Address 1810 EMBARCADERO ROAD
City-State-Zip: PALO ALTO CA 94303

Title DIRECTOR
Name LACERTE, RENE
Address 1810 EMBARCADERO ROAD
City-State-Zip: PALO ALTO CA 94303

Title DIRECTOR
Name CHAO, DAVID
Address 2420 SAND HILL ROAD, SUITE 200
City-State-Zip: MENLO PARK CA 94025

Title DIRECTOR
Name HORNIK, DAVID
Address 2480 SAND HILL RD #101
City-State-Zip: MENLO PARK CA 94025

Title DIRECTOR
Name JACOBS, BRIAN
Address 160 BOVET ROAD, SUITE 300
City-State-Zip: SAN MATEO CA 94402

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAJESH AJI**SECRETARY**

02/27/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JOHNSON, MARK
Address 1230 PEACHTREE STREET, SUITE 1150
City-State-Zip: ATLANTA GA 30309

Title DIRECTOR
Name O'DRISCOLL, RORY
Address 950 TOWER LANE, SUITE 700
City-State-Zip: FOSTER CITY CA 94404

Title DIRECTOR
Name MAWHINNEY, THOMAS
Address 505 HAMILTON AVENUE, SUITE 310
City-State-Zip: PALO ALTO CA 94301

Title DIRECTOR
Name PIAKER, STEVEN
Address 280 PARK AVENUE 3RD FLOOR
City-State-Zip: NEW YORK NY 10017