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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: VENDORPANEL INC.			
	e of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certifica above referenced foreign corporation to	te of Good Stan	iding" and check are subm	Business in Florida." itted to register the
Please return all correspondence concer	ning this matter	to the following:	
KIM ABEL			
	Name of	Person	
US SETUP LLC			
	Firm/Con	ıpany	•
1734 E BOSTON STREET STE 103			
	Addr	ess	
GILBERT, AZ 85295			
	City/State a	nd Zip code	
kim@esquiregroup.com			<u></u>
E-mail addre	ess: (to be used	for future annual report no	tification)
For further information concerning this	matter, please o	call:	
Kim Abel	480 at (478-4515	
Name of Person	Area Cod	e Daytime Telepho	one Number
STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Enclosed is a check for the following ar Please make check payable to: FLORIDA S70.00 Filing Fee S78.75 Fil Certificate	DEPARTMENT	© OF STATE ☐ \$78.75 Filing Fee & Certified Copy	S87.50 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.

– VENDÖRPANI 1.	EL INC.		
	orporation; must include "INCORPORATED." " orp." "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION."	
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting business in Florida)	
2. DELAWARE	3.		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 02/04/2021	5.		
(Date	of incorporation) 5	(Date of duration, if other than perpetual)	
6			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 STREET #950, WILMINGTON, DE 19801		
/	(Principal office	street address)	
1440 WEST TA	YLOR STREET #2007, CHICAGO, IL 60607		
	(Current mailing a	iddress, if different)	
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	
Office Address:	17888 67TH COURT NORTH	_	
	LOXAHATCHEE	. Florida <u>33470</u>	
		. Florida	

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.

Amber Ragland on behalf of InCorp Services, Inc.
(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						
□Chairman	Name: David Warren Bubner	□ C'hairman	Name:			
□Vice Chairman	Address: Level 2, 360 Little Collins Street	□Vice Chairman	Address:			
Director	Melbourne, VIC 3000 Australia	Director	Wallington, VIC 3222 Australia			
□President		□President				
□Vice President		□Vice President				
□Secretary	☐Treasurer	☐Secretary	☐Treasurer			
□Other	□Other	[]Other	Other			
□Chairman □Vice Chairman	David Warren Bubner Name: Level 2, 360 Little Collins St Address:	□Chairman □Vice Chairman	Name: Level 2, 360 Little Collins Address:			
Director	Melbourne, VIC 3000 Australia	Director	Melbourne, V1C 3000 Australia			
■ President		□President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	Secretary	Treasurer			
Other	Other	□Other				
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chaiπnan	Address;			
□Director	Chicago, IL 60607	□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	Treasurer	□Secretary	□Treasurer			
□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 Annual Report form.						
12 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 8.817.155, F.S.						
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VENDORPANEL 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 FIFTEENTH DAY OF APRIL, A.D. 2021.

Authentication: 202975684

Date: 04-15-21