

**2021 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F19000005594

**Entity Name:** EXPENSIFY, INC.**Current Principal Place of Business:**401 SW 5TH AVENUE  
PORTLAND, OR 97204**Current Mailing Address:**401 SW 5TH AVENUE  
PORTLAND, OR 97204 US**FEI Number:** 27-0239450**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:** JENNY R MABUS

01/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRESIDENT, SECRETARY,  
TREASURER, CEO**Name** BARRETT, DAVID**Address** 5331 NE 31ST AVENUE**City-State-Zip:** PORTLAND OR 97211**Title** CCO**Name** EASON, COLE**Address** 1420 NW LOVEJOY ST APT 702**City-State-Zip:** PORTLAND OR 97209**Title** DIRECTOR**Name** SCHAFFER, RYAN**Address** 1284 DEVONSHIRE DR**City-State-Zip:** SAN DIEGO CA 92107**Title** CFO**Name** REED, JAN**Address** 215 DURHAM ST**City-State-Zip:** MENLO PARK CA 94025

*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:** DAVID BARRETT

CEO

01/15/2021

Electronic Signature of Signing Officer/Director Detail

Date