

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of <u>RIGL 7-1.2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

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for that purpose submits the following statement:				
1. The name of the corporation is:		· · ·		
XPEL, INC.				
It is incorporated under the laws of: Nevada				
3. The name, if different, which it elects to use in Rh	ode Island is:			
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island.				
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:				
4. The date of its incorporation is: 10/14/2003				
And the period of its duration is: CHECK ONE BOX ONLY ✓ Perpetual (on-going)				
Date certain for dissolution				
5. The address of its principal office is:				
711 BROADWAY ST, STE 320, SAN ANTONIO, TX 78215				
6. The name and address of the initial registered agent/office in Rhode Island				
Agent Name First Corporate Solutions, Inc.				
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200				
City/Town Warwick	State RHODE ISLAND	Zıp Code 028888		

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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7. The purpose or purpo	ses which it proposes to pu	ursue in the transaction of b	ousiness in Rhode Island are:
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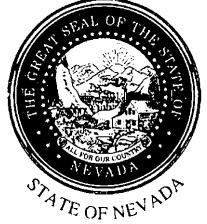
8. (a) The names and restate or country of which		irectors (optional, unless di	rectors are required under the laws of the
NAME		AI	DDRESS
<u></u>			
1:			
			Check the box to indicate an attachment
	espective addresses of its p if which it is incorporated):	rincipal officers (mandatory	if directors are not required under the laws
OFFICE	NAME	· · ·	ADDRESS
PRESIDENT	IAVIAIC		ADDICESS
ricolociti			
VICE PRESIDENT			
TREASURER			
SECRETARY			
SECRETARY			
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Check the box to indicate an attachment
9. The aggregate number	er of shares which it has au	thority to issue; itemized by	classes, par value of shares, shares without
par value, and series, if	any, within a class, is:		
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
100,000,000	Common		\$0.001
10,000,000	Preferred		\$0.001
	- releited	-	_
			of the property of the corporation to be
	during the following year be ever located. (Note: Percen		erty of the corporation to be owned during eat.)
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<u> </u>			
11 As estimate as a s		n of the gross amount of h	usings to be transported by the corneration
			usiness to be transacted by the corporation ired to the gross amount thereof which will be
	ration during the following y		
0 %			
70			

XPEL, Inc. Directors & Officers

Directors	Address
Ryan L Pape	711 Broadway St., Suite 320, San Antonio, TX 78215
Mark E Adams	711 Broadway St., Suite 320, San Antonio, TX 78215
Richard K Crumly	711 Broadway St., Suite 320, San Antonio, TX 78215
Michael A Klonne	711 Broadway St., Suite 320, San Antonio, TX 78215
Stacy L Bogart	711 Broadway St., Suite 320, San Antonio, TX 78215
Officers	Address
Ryan L Pape, CEO	711 Broadway St., Suite 320, San Antonio, TX 78215
Barry R Wood, CFO	711 Broadway St., Suite 320, San Antonio, TX 78215
Mathieu Moreau, SVP	711 Broadway St., Suite 320, San Antonio, TX 78215

12. This application must be accompanied by a <u>Certificate of G</u> formation dated within 60 days of the date of this filing.	ood Standing/Letter of Status from the state or country of			
13. Date when the Certificate of Authority will be effective: CHE	CK ONE BOX ONLY			
✓ Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date of filing)				
14. Under penalty of perjury, I declare and affirm that I have example any accompanying attachments, and that all statements contain				
Type or Print Name of Authorized Officer	Date			
BARRY WOOD	4/26/2023			
Signature of Authorized Officer of the Corporation	<u> </u>			
is perfect				
Barry Wood (Apr 26, 2023 12:38 CDT)				

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **XPEL**, **INC**., as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 10/14/2003, and is in good standing in this state.

Certificate Number: B202304253601630

You may verify this certificate online at http://www.nysos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 04/25/2023.

FRANCISCO V. AGUILAR Secretary of State