

ANNEX No. 2

AFFIDAVIT MODEL

AFFIDAVIT OF REGULAR OPERATIONS SIGNED WITH A BENEFICIARY IN THE COUNTRY WITH WHICH THERE IS A CURRENT AGREEMENT TO AVOID DOUBLE TAXATION WITH THE PURPOSE TO CREDIT THE CIRCUMSTANCES INDICATED IN N° 4, OF ARTICLE 74 OF THE LAW ON INCOME TAX AND THE WITHHOLDING AGENT DOES NOT WITHHOLD THE TAX OR APPLY A REDUCED RATE UNDER SAID AGREEMENT.

1.- IDENTIFICATION OF THE DECLARANT (BENEFICIARY OF THE INCOME)

Company name or full name of the declarant: **Spreedly, Inc.**  
Legal type (natural person, company or other entities): **Company**  
Date of incorporation or of birth: **July 12, 2007**  
Number or code: **Inc.**  
Tax Identification: **26-0522184**  
Address:  
Street and number, office, apartment: **300 Morris St., Suite 400**  
City of residence Country of residence: **Durham, NC, USA**  
Email Telephone Postal code Business or activity: **27707**

2.- IDENTIFICATION OF THE REPRESENTATIVES

Full name of Representative 1: **Kimberly Vail**  
Date of birth  
Tax identification number or code  
Address  
Street and number, office, apartment: **300 Morris St., Suite 400**  
City of residence Country of residence: **Durham, NC, USA**  
Email Telephone: **nellie@spreadly.com**  
Postal code Business or activity: **27707**

Full name of Representative 2: **Justin Benson**  
Date of birth  
Tax identification number or code  
Address  
Street and number, office, apartment: **300 Morris St., Suite 400**  
City of residence Country of residence: **Durham, NC, USA**  
Email Telephone: **justin@spreadly.com**  
Postal code Business or activity: **27707**

### 3.- IDENTIFICATION OF THE PAYER (HOLDING AGENT)

Company name or full name of the Payer: **Cencosud Retail S.A.**,

RUT of the Payer (including verification digit): **93834000-5**

### 4.- DECLARATION

Place (country, city, province) of the declaration: **Durham, NC, USA**

Start date of the agreement or subscription of the contract: **June 30, 2024**

Contract period: **24 Months**

Nature of the operations to be carried out Frequency of the operations: **Payment Orchestration**

Country with which an agreement is in force to avoid current double taxation: **USA**

Declaration date:

The identified Declarant, duly represented, when applicable, declares under oath the following:

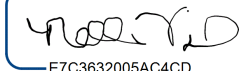
i. The operations described are not and will not be carried out through an establishment permanent or fixed base to which the income or amounts paid must be attributed, distribute, withdraw, remit, credit into account or make available by the Payer, and,

ii. Meets the requirements to be a beneficiary of the provisions of the agreement.

Compliance with the conditions indicated in paragraphs i and ii will be ratified on December 31 December of the respective year or at the end of the agreement or contract signed.

Name and signature Declarant or his/her Representative(s) Name and signature Declarant or his/her Representative(s)

DocuSigned by:



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Kimberly Vail

7/22/2024

Date