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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC
Account Number : 120100000062
Phone : (888)795-7274
Fax Number : (888)706-7274

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

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REGISTERED AGENT CHANGE RDM INTERNATIONAL, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: RDM International, Inc.

Name of Corporation

DOCUMENT NUMBER: F08000001966

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Margot Mullin

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margot Mullin

att OO

705-7274

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

15129570210

H190002300183

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chai	provisions of sections 607.05 nge is submitted for a corpo r to change its registered off	ration organized	d under the la	ws of the State of \	/irginia
1. The name of the	he corporation: RDM In	ternationa	ıl, Inc.	· · · · · · · · · · · · · · · · · · ·	
	office address: <u>14310 S</u> ILLY, VA 20151	ULLYFIE	LD CIRC	CLE, SUITE	600
3. The mailing a	ddress (if different):				
4. Date of incorp	oration/qualification: 5/1/	/2008	_ Document	number: <u>F080</u> 0	00001966
	street address of the current tment of State: (If resigned,		t and registere	ed office on file wi	th the
	CORPORATIO	N SERV	ICE C	YNA9MC	
	1201 HAYS STREET				
	TALLAHASSEE		FL	32301	2019 :::
6. The name and (if changed):	street address of the new re			_	•
Registered Agent Solutions, Inc.					
155 Office Plaza Dr. Suite A					
	Tallahassee	FL	3230)1	
The street addre	ss of its registered office an be identical.	d the street add	ress of the bu	siness office of its	registered agent,
Such change wa authorized by th	s authorized by resolution c e board, or the corporation	luly adopted by has been notifie	its board of ded in writing o	lirectors or by an of the change.	officer so
/s/ Peter Y	e of an officer or director	<u>P</u>	eter Yip	al or typed name and talk	President
I further agree to performance of	the appointment as register o comply with the provision my duties, and I am familia s document is being filed me that the corporation has be	is of all statutes	relative to th	e proper and comp	ne ronictored
Mode Sign	atur Registered Agent	0	8/01/201	Date	
If signing on bel	nalf of an entity:				
	Hart, Assistant Secreta ped or Printed Name	ary			