Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H12000051584 3)))



H120000515843ABC-

Note: DO NOT	hit the REFRESH/RELOAD button on your browser from this page.
	Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: TRIAD PROFESSIONAL SERVICES, LLC Account Name

Account Number : 120020000094 : (770)777-2091 Fax Number

: (770)220-1943

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

Ridge Line Services, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

2/27/2012

https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

11			
TO: New Filing Sect Division of Corp			
{}			
SUBJECT: RIDGE		lon - must include suffix	
	tanne or cothorar	ion - Mast membo Samix	
Dear Sir or Madam:			
"Certificate of Existence	on by Foreign Corporation f ;" or "Certificate of Good S a corporation to transact bus	tanding" and check are subr	t Business in Florida," nitted to register the
Please return all correspo	andence concerning this mat	tter to the following:	
Sharon K. Gray			
	Name	of Person	
Triad Professional Servi	ces, LLC		
	Firm/C	ompany	
1720 Windward Concou	rse, Ste. 390		
	Ad	ldress	
Alpharetta, GA 30005			
	City/Stat	e and Zip code	
kpeck@ridgeline-inc.cor	n n		
		ed for future annual report n	otification)
For further information of	oncerning this matter, pleas	te call:	
I AL EMINIST BUSA. HIMITAN	, , ,		
Sharon K, Gray	at (770	777-2091	
Name of Perso		ea Code & Daytime Telepho	one Number
STREET/COU New Filing Sec Division of Con Clifton Building 2661 Executive Tallahassee, FL	dorations S Center Circle	MAILING AN New Filing Se Division of Co P.O. Box 6327 Tallahassee, F.	ction orporations
Enclosed is a check for	the following amount:		
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy	 \$87.50 Filing Fee, Certificate of Status & Certified Copy
		(((H12000)	051584 3)))

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.

1. RIDGE LINE	SERVICES, I	INC.			
(Enter name of	corporation; m Corp," "Inc," "	ntst include "INCORPORA "Cp," or "Corp.")	TED	" "COMPANY," "CORPORATION,"	
(If name unava	lable in Florida	in, enter alternate corporate	name	adopted for the purpose of transacting business	in Florida)
2. Georgia	_		3.	26-1856110	
	y under the law	of which it is incorporated)	(FEI number, if applicable)	
4, 01/29/2008			_ 5.	Perpetual	
(Dai	e of incorporat	it (n)	_	(Duration: Year corp. will cease to exist or "p	perpetual")
6. Upon qualifica	etion				
	(SEE			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 1011 Airport \$	treet, Galnos				
		(Principal offic	e add	ress)	
1011 Airport S	treet, Gaines	ville, GA 30501			
		(Current mailin	g add	lress)	12 ON 1
- Rutinopp mas		- ilogo professional trovali		arah andinar	12 FEB 27
		vides; professional travell		ountry to be carried out in state of Florida)	
	, ,			•	ے قا
9. Name and stre	et address of	Florida registered agent:	(P.C	D. Box NOT acceptuble)	丑
Name:	NRAI Ser	rylces, Inc.			. و
Office Address:	515 East	Park Avenue			: 19
011100 110010001	<u> </u>				
	Tallahass	(City)		, Florida 32301 (Zip code)	
		(0.03)		(Zip code)	
10. Registered a				l de la	
				ice of process for the above stated corporation as registered agent and agree to act in	
				vent as registered agent and agree to act in relative to the proper and complete perform	
and I am familla	r with and ac	ccept the obligations of n	ny po	sition as registered agent.	
	NRAI Servici	, , ,	· /	- •	:
	/			1 .	!
	Ву: //	peron 1.	<u>\</u>	meen	•
		(Registered agent's signs			
11 Arreshed :	Sharon K. G.	Sray, Assistant Secretar	/	not more than 90 days prior to delivery of t	hie appliantion to
11. Attached is a	Locumento Ot	r altiprettee anth storucutte	acca,	successive man an only butter to degree a of t	ma appression 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.

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12. Names and business address	ses of officers and/or directors:		
A. DIRECTORS			
Chairman: Karen D. Peck			
Address: 1011 Airport Street,	Gainesville, GA 30501		
		. ,	
Vice Chairman:			
Address:			
			•
Director:		-	
Address:		···-	
	<u> </u>		
Director:		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Address:			- .
			
B. OFFICERS			
President: Karen D. Peck			
Address: 1011 Airport Street			
Gainesville, GA 305	501		
Vice President:		~ <u>*</u>	SEAM
Address:		33	ᅙ
		_2	유조그
Secretary: BriAnna M. Valdez		-	_골(우(
Address: 1011 Airport Street	Gainesville, GA 30501	<u>ب</u>	STA
Treasurer: Karen D. Peck		9	- 10 KS
Address: 1011 Airport Street	Gainesville, GA 30501		
NOTE: If necessary, you may a	tach of addendum to the application listing additional officers and/or directo	rs.	
13.	BLECK	·	_
· 11	of Director or Officer listed in number 12 of the application)		
14. Karen D. Peck, CEO (Typed c	r printed name and capacity of person signing application)		_
	(((H12000051584 3)))		

Control No. 08008042

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

RIDGE LINE SERVICES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 01/29/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annual and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 24th day of February, 2012

B: P.h.

Brian P. Kemp Secretary of State

Certification Number: 8245160-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

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