F21000002781

(Requestor's Name)				
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. PICK-UP WAIT MAIL				
(Business Entity Name)				
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	J3/06/2024	
Name:	Patrice Rush	_
Reference #:_	2292279	_
Entity Name:_	RIDGELINE IN	TERNATIONAL, INC.
☐ Articles	s of Incorporation/Authorization	ı to Transact Business
Amend	lment	
Change	e of Agent	
☐ Reinsta	atement	
Conver	rsion	
☐ Merger		
Dissolu	ution/Withdrawal	
☐ Fictitio	us Name	
Other_		
Authorized An	mount:\$35.00	

F: 800.944.6607

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Flo on organized under the laws of the Sta or registered agent, or both, in the Sta	te of Virginia	
1. The name of t	he corporation:	DGELINE INTERNATION	NAL, INC.	
2. The principal	office address: No Change			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: May	3, 2021 Document number:	F21000002781	
5. The name and		istered agent and registered office on t	file with the	
	INCORPORAT	TING SERVICES LTD		
1540 GLENWAY DRIVE				
	TALLAHA	SSEE, FL 32301	2024 HAR -6	
6. The name and (if changed):		ered agent (if changed) and /or register	-6 AMII: 47	
	COGENCY GLOB	 	— <u>Ran</u> 5	
	115 North Calhoun St., Suite 4 P.O. Box NOT acceptable			
		32301		
The street addre	ess of its registered office and the be identical.	e street address of the business office	e of its registered agent,	
-		adopted by its board of directors or been notified in writing of the change		
/s/ Erik Wittre	eich	Erik Wittreich	CEO	
I hereby accept I further agree to performance of agent. Or, if this	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	Printed or typed name igent and agree to act in this capacity all statutes relative to the proper and th and accept the obligation of my po y to reflect a change in the registered otified in writing of this change.). d complete sition as registered	
/s/ Tim May	ville	3/6/2024		
	nature of Registered Agent	Date		
If signing on be	half of an entity:			

Tim Mayville, Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *