Control Number : 23103203

STATE OF GEORGIA

Secretary of State

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

AMENDED CERTIFICATE OF AUTHORITY

NAME CHANGE

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Ripple Fiber Inc.
a Foreign Profit Corporation

formed under the laws of the State of **South Carolina** and authorized to transact business in Georgia on **05/02/2023**, has amended its application to transact business in this state by the filing of an amendment changing its name to

Ripple Fiber LLC
a Foreign Limited Liability Company

and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **05/22/2024**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

DocuSign Envelope ID: E2ECC90F-33AC-40B3-AE09-F801CEB19A9B

Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817
sos.georgia.gov/corporations

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

IMPORTANT: Please provide the entity's primary email address when completing this form.

Primary Email Address: josh@ripplefiber.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1. Ripple Fiber LLC
   Name of Limited Liability Company
   Name Reservation Number (Optional)

   05/02/2023
   Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the effective date of this application, a $500 penalty plus fees must be paid. Penalty is statutory and cannot be waived by Secretary of State.)

2. Corporation Service Company
   Name* of Filing Person

   251 Little Falls Drive | Wilmington | DE | 19808
   Address | City | State | Zip Code

   Filer's Email Address
   Telephone Number

3. Ripple Fiber LLC
   Name of Limited Liability Company in State or Country of Formation

   South Carolina | 05/08/2024 | Perpetual
   Jurisdiction (Home State or Country) | Date of Formation in Home State or Country | Period of Duration

4. Suite A101, 330 Pelham Road | Greenville | SC | 29615
   Address of Principal Place of Business | City | State | Zip Code

5. Corporation Service Company | compliancemail@cscglobal.com
   Name* of Registered Agent in Georgia | Registered Agent's Email Address

   2 Sun Court, Suite 400
   Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address)

   Peachtree Corners | Gwinnett | GA | 30092
   City | County | State | Zip Code

6. Stuart van der Veen 6000 Fairview Road, Suite 300 | Charlotte | NC | 28210
   Manager's Name* & Address (person with substantial responsibility for managing LLC's business activities) | City | State | Zip Code

7. Suite A101, 330 Pelham Road | Greenville | SC | 29615
   Address Where Limited Liability Company's Records Are Maintained | City | State | Zip Code

8. Effective Date: (Choose one) ☑ Upon filing ☐ Delayed effective date and/or time: _____
   (A delayed effective date must be within 90 days of the filing date.)

9. **NOTICE:** Mail the following items to the Secretary of State at the above address
   (1) This application;
   (2) Fee of $235.00 ($225 filing fee + $10 paper filing service charge) payable to "Secretary of State." Filing fees are non-refundable.

   This application is signed by a person duly authorized to sign such instruments by the laws of the jurisdiction under which the foreign limited liability company is organized. The foreign limited liability company undertakes to keep its records at the address shown in #7 above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence.

   DocuSigned by: Stuart van der Veen
   Signature of Authorized Person
   5/15/2024
   Date

   Stuart van der Veen
   Print Name*
   Authorized Signatory
   Title

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.

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Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
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APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY OF A FOREIGN ENTITY

An amended certificate of authority is obtained by filing an application for amended certificate of authority if a foreign entity changes its name or its jurisdiction of organization. If any other information required in the original application has changed, please use this form, attaching additional pages if necessary, to inform the Secretary of State of said changes. Complete (where applicable) and return this form with a check or money order payable to "Secretary of State" in the amount of $30.00 ($20.00 filing fee plus $10 paper filing service charge).

11.. Entity Name: Ripple Fiber Inc.

2. Entity Control Number: 23103203

3. Entity Type (check one only):

- ☑ **Corporation** (choose one type) ☑ **Profit** ○ **Nonprofit** ○ **Professional** ○ **Benefit**
  (Corporation must provide certificate of existence from home state with new name, if applicable.)
- ☐ **Limited Liability Company (LLC)**
- ☐ **Limited Partnership/Limited Liability Limited Partnership (LP/LLLP)**
- ☐ **Limited Liability Partnership (LLP)**

4. State/Country of Home Jurisdiction: South Carolina

5. Date of Authorization in Georgia: 05/02/2023

6. New Entity Type (if applicable):

- ☐ **Corporation** (choose one type) ☑ **Profit** ○ **Nonprofit** ○ **Professional** ○ **Benefit**
  (Corporation must provide certificate of existence from home state with new name, if applicable.)
- ☑ **Limited Liability Company**
- ☐ **Limited Partnership/Limited Liability Limited Partnership**
- ☐ **Limited Liability Partnership**

7. New Name of Entity (if applicable): Ripple Fiber LLC

8. New Home Jurisdiction (if applicable): South Carolina

9. Effective Date: (Choose one) ☑ Upon filing ☐ Delayed effective date and/or time: _____
(A delayed effective date must be within 90 days of the filing date.)

10. DocuSigned by: Stuart Van Der Veen 1909A82DBB5D4FC... **Signature** May 8, 2024 **Date**

Print Name*: Stuart van der Veen

Email Address: stuart@platformips.com

Signer's Capacity (check one only):

Corporation: ☐ Officer ☐ Chairperson of Board of Directors ☐ Attorney-in-fact ☐ Attorney
☐ Director ☐ Court-Appointed Fiduciary ☐ Incorporator ☑ Authorized Person

LLC: ☐ Member ☐ Manager ☐ Organizer ☐ Attorney-in-fact ☐ Attorney ☐ Court-Appointed Fiduciary ☐ Authorized Person

LP/LLLP: ☐ General Partner ☐ Attorney-in-fact ☐ Attorney

LLP: ☐ General Partner ☐ Managing Partner ☐ Partner ☐ Attorney-in-fact ☐ Attorney ☐ Authorized Person

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.

Secretary of State

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CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
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(404) 656-2817
sos.ga.gov

Electronically Filed
Secretary of State
Filing Date: 5/16/2024 11:37:52 AM

TRANSMITTAL INFORMATION FORM
BUSINESS AMENDMENT

1. **Ripple Fiber Inc.**
   Entity Name

   23103203
   Entity Control No.

2. **Corporation Service Company**
   Name of Person Filing Business Amendment

251 Little Falls Drive	**Wilmington**	**DE**	**19808**
Address	City	State	Zip Code

3. Submitted with this filing is a filing fee of $20.00 payable to “Secretary of State”. Filing fees are non-refundable.

   I understand that this Transmittal Information Form is included as part of my filing, and the information on this form will be entered in the Secretary of State business entity database. I certify that the above information is true and correct to the best of my knowledge.

   Stuart van der Veen
   Signature of Authorized Person