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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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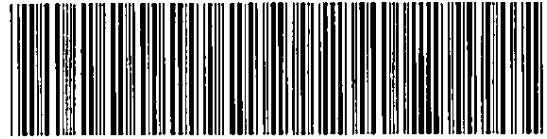
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RAMBO HOLDINGS, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos X. Rodriguez
Name of Person

Halpern Rodriguez, LLP
Firm/Company

355 Alhambra Circle, Suite 1101
Address

Coral Gables, FL 33134
City/State and Zip Code

hr@hrllplaw.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Janelle A. Arguelles at (305) 4428883
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

