

P05 DDD 117682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

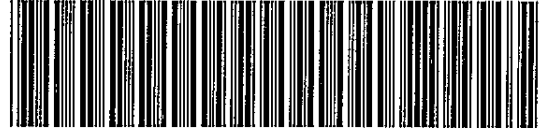
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2005

RAMI TECHNOLOGY, INC.
10651 NW 19TH STREET
MIAMI, FL 33131 US

SUBJECT: RAMI TECHNOLOGY, INC.
Ref. Number: P05000117682

Our records indicate the registered agent for the above named corporation resigned on December 7, 2005 and that the corporation currently does not have a registered agent designated.

Chapter 607/617, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Enclosed is registered agent designation application for you to complete and return with a filing fee of \$35.

If you should need any further information, please contact our office at (850) 245-6050.

Carol Mustain
Document Specialist
Division of Corporations

Letter number: 005A00072557

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Rami Technology Inc.
2. The principal office address: 10651 NW 19 Street
Miami FL 33131
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/23/2005 Document number: PO5000117682

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Coprolite Corporation
1 SE 3rd Avenue Ste 2130
Miami FL 33131

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alexandre Wolloch
10651 NW 19 Street
(P O Box NOT acceptable)
Miami FL 33172

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Richard Knecht, Director
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314