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#### **COVER LETTER**

SUBJECT: Real Boy Productions LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000139518 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 10601 Clarence Drive Suite 250 Address Frisco, TX 75034 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

### MAILING ADDRESS:

Name of Person

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

### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Registration Section
Division of Corporations

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115,	Florida Statutes, the under	signed.		
United States Corporation Agents, Inc.  Name of Registered Agent			_ , hereby resigns as		
	Name of Limite	ed Liability Company			<b>_</b> ·
L22000139518					
Document	Number, if known				
A copy of this resigna	tion was mailed to the abo	ove listed limited liability c	ompany at its last kr	nown addres:	S.
The agency is termina		inued on the 31st day after	the date on which th	is statement	is filed
		Treetlein Signature of Resigning Agent	<del> </del>		
If signing on behalf of	an entity:			20	
	Erik Treutlein		3	2025 JUL 14	7
	Тур	ed or Printed Name	<del></del>		•
	Vice President on behalf o	of United States Corporation Ag	ents, Inc.		
		Capacity			
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability cor Administratively dissolved withdrawn limited liability	npany I/ voluntarily dissolv y company	ved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314