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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Real Boy Enterprises 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:				
Karen Prievo Name of Person				
Real Boy Enterprises LLC Firm/Company				
24 N Orlando Ave, Ste G Address				
Cocoa Beach FL 32931 City/State and Zip Code				
Prievo K@ 9 mail. Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Gabe Davis at (321) 613-3695  Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				

Enclosed is a check for the following amount:

□ \$25 Filing Fee

Tallahassee, Florida 32301

\$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	time of the limited liability company: Real Boy Enter pr	ises L.L.C.
2. (a)	480 E Merrimac Drive  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Men: # Island, FC	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	32952	
2		16000105451
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of	Chata:
		State.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Sinte A	
	tampa, FC, FL 336	A A A A A A A A A A A A A A A A A A A
(b)	Karen Press	W CITA
(5)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	480 E. Merimac Drive	E. FLORES
	NEW Registered Office Address:	RA S
	merr: H Island	
	.FL 3295)	
		<del></del>
the ch agent was/w	limited liability company is not organized under the laws of the State of ange or changes are made, the Florida street address of the registered of will be identical. Or, in the case of a Florida limited liability company were authorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability	ffice and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in
		Johnel Davis
I here provis the ob to met notifie	ature of a member or authorized representative of a member  beby accept the appointment as registered agent and agree to act in this  sions of all statutes relative to the proper and complete performance of  ligations of my position as registered agent as provided for in Chapter  rely reflect a change in the registered office address, I hereby confirm  and in writing of this change.	Printed or typed name of signee capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company: Real Boy Enterprise	s L.L. C.
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Memitt Island, FC 32952	
3.		000 105 451
5. (a)	Date of filing/registration in Florida  4.  Linked States Corporation Agents INC.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State	Document number
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Suite A Fampa, FC, FL 33612	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	17 JU FALLAH
	480 E. Menimac Drive  NEW Registered Office Address:	N-S ASSEE.
	mercit Island	PIS NALL AND A STATE OF THE STA
the cha agent v was/we	imited liability company is not organized under the laws of the State of Flounge or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, it is the ere authorized by an affirmative vote of the members of the limited liability controls of organization or the operating agreement of the limited liability companies.	e and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
	Gol	Printed or typed name of signce
I herel provisi the obl	ture of a member or authorized representative of a member by accept the appointment as registered agent and agree to act in this cape ions of all statutes relative to the proper and complete performance of my o igations of my position as registered agent as provided for in Chapter 605 ely reflect a change in the registered office address, I hereby confirm that i d in writing of this change.	acity I further agree to comply with the
Signatu	re of Registered Agent	