I hereby certify that the information indicated on this report or supplemental report is true and acc oath; that I am a managing member or manager of the limited liability company or the receiver of that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: BRIAN BARTCZAK	AMBR	03/16/2017

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE		03/16/2017			
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	AMBR	Title	AMBR		
Name	TRUJILLO, DAVID	Name	BARTCZAK, BRIAN		
Address	350 NAVARRE DRIVE	Address	888 BISCAYNE BLVD		
City-State-Zip:	MIAMI SPRINGS FL 33166	City-State-Zip:	1809 MIAMI FL 33132		
		City Clate Zip.			

888 BISCAYNE BLVD

101 MIAMI, FL 33132 US

Current Mailing Address:

FEI Number: 46-5629095

Name and Address of Current Registered Agent:

NYKAD HOLDINGS LLC 4330 8TH AVE SE NAPLES, FL 34117 US

Entity Name: MY CAKE LAB U.S.A., LLC

Current Principal Place of Business:

888 BISCAYNE BLVD 101 MIAMI, FL 33132

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L14000075999

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

Date