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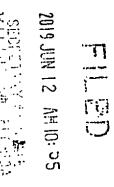
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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Y SULKER JUN 2 4 2019

COVER LETTER

_	istration Section ision of Corporations					
SUBJECT:	Tica Designer Cakes LLC					
JOBJICI.	Name of Limited Liability Company					
Dear Sir or l	Madam:					
The enclose	d Registered Agent/Registered Office C	Change and fe	c(s) are submitted for filing.			
Please return	n all correspondence concerning this ma	atter to the fol	lowing:			
Wesphald	Benjamin					
	Name of Person					
Benjamin	Global Holdings					
	Firm/Company					
5851 Sum	merlake Drive - Suite 3-111					
	Address					
Davie FL :	33314					
	City/State and Zip Code					
benholdin	gsinfo@gmail.com					
É-mail	address: (to be used for future annual	report notifica	tion)			
For further i	nformation concerning this matter, plea	ise call:				
Wesphald	Benjamin	954 t (918-9431			
	Name of Person	,	Area Code & Daytime Telephone Number			
Reg Divi Clif 266	REET/COURIER ADDRESS: istration Section ision of Corporations from Building 1 Executive Center Circle ahassee, Florida 32301	Regis Divis P.O. 1	tration Section ion of Corporations Box 6327 hassee, Florida 32314			
Enc	Enclosed is a check for the following amount:					
☑ \$	25 Filing Fee	\$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. N	ame of the limited liability company:	r Cakes LLC			
2. (a)	6031 Summerlake Drive	(b) 6031 S	(b) 6031 Summerlake Drive		
Σ. (Δ)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	# 2-306	# 2-306	# 2-306 Davie, FL 33314		
	Davie, FL 33314	Davie,			
	6/10/2019	L180001	52485		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	United States Corporation Agents, Inc.				
J. (u	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	ate:		
	13302 Winding Oak Court				
	Registered Office Address (MUST BE FLORIDA STREET	- z			
	Α				
	Tampa FI	33612	2019 JUN 12		
(b)	Benjamin Global Holdings		A THE STATE OF THE		
(0)	Enter name of NEW Registered Agent and/or NEW Registered				
	5851 Summerlake Drive		: 55 55		
	NEW Registered Office Address:		_		
	Suite 3-111				
	Davie FI	33314			
the chagent was/w the arr	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members dicles of organization or the operating agreement of the manufacture of a member of a member and agreement appointment as registered agent and agreement agent and agreement agreement agreement agreement agreement and agreement agreem	f the registered officiability company, it of the limited liability co limited liability co Carline St A	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany. **Tromand** Printed or typed name of signee** **pacity.* I further agree to comply with the		
provis the ob to mei	tions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, l rd in writing of the change.	e performance of my ed for in Chapter 60 hereby confirm tha	y duties, and I am Jamiliar with and accept 95, F.S. Or, if this document is heing filed t the limited liability company has been		
Signat	ure of Registore Agent				