Po500129885

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/13/05--01051--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CAKE CREATIVITY INC. (Name of Corporation)
DOCUMENT NUMBER: POSO00129885
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BETTWA S. WOLDOW (Name of Person)
CAKE CREATIVITY INC. (Name of Form/Company)
1958 LOST Spring CT (Address)
Longwood FL 32837 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (407) 353 - 2389 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building Clifton Building Clifton Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, SARAH M SCHOTT	, hereby resign as VICE	TRESIDENT (Title)
of <u>CAKE CREATIVITY</u> (Name of Corpor	/vc	
POSODO 129885 , a corr (Document Number, if known)	poration organized under the la	aws of the State of
FLORIDA.		
Sarah Se Signature	of resigning officer/director)	PILED PM 4: 03 05 DEC 13 PM 4: 03 SECRETARY OF STATE A TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314