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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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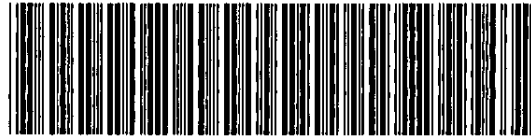
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUN 12 PM 4:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch JUN 18 2012

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: **The Cake Shop Inc.**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: **Paula M. Cawby**

Name (Printed or typed)

**1001 E Nine Mile Rd. #300**

Address

**Pensacola FL 32514**

City, State & Zip

**850 476-1744**

Daytime Telephone number

**pensacolacakeshop@gmail.com**

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

May 19, 2012

I Charlotte K. Colbert have dissolved my corporation effective May 19, 2012 and do not intend to revoke the dissolution and do not plan to reinstate my business. I give permission for Paula and Jason Cawby to use the name, The Cake Shop.

Charlotte K. Colbert

Charlotte K. Colbert

May 19, 2012

Date

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The Cake Shop Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1001 E Nine Mile Rd. #300  
Pensacola FL 32514

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Bake, sell cakes, cookies, pies.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Paula M. Cawby, President  
Address: 7370 Miranda Sue Blvd.  
Pensacola FL 32526

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Jason E. Cawby, Vice President  
Address: 7370 Miranda Sue Blvd.  
Pensacola FL 32526

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Paula M. Cawby  
Address: 7370 Miranda Sue Blvd.  
Pensacola FL 32526

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Paula M. Cawby  
Address: 7370 Miranda Sue Blvd.  
Pensacola FL 32526

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Paula Cawby  
Required Signature/Registered Agent

5/31/2012  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Paula Cawby  
Required Signature/Incorporator

5/31/2012  
Date

FILED  
12 JUN 12 PM 4:05  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399