

F0300000 4948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

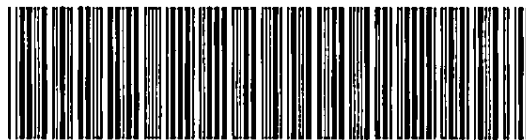
(Business Entity Name)

(Document Number)

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

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08/11/21--01014--010 \*\*35.00

2021 SEP 15 PM12:01  
FILED  
CLERK OF STATE  
HALL COUNTY  
GA

FILED

GA

SEP 16 2021

2:00 PM



RECEIVED

2021 SEP 15 AM 7:56

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 2, 2021

JAMES HAYDEN  
41 W 4TH ST  
PANAMA CUTY, FL 32401

SUBJECT: THE BAGEL MAKER INC.  
Ref. Number: F03000004948

We have received your document for THE BAGEL MAKER INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

On line 2 of the application please list the correct state Nevada. The certificate must have the new jurisdiction(state).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley  
Regulatory Specialist II

Letter Number: 921A00021205

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Bagel Maker Inc  
Name of Corporation

**DOCUMENT NUMBER:** FO3000004948

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Hayden  
Name of Contact Person

The Bagel Maker Inc  
Firm/Company

41 W 4TH ST  
Address

PANAMA CITY FL 32401  
City/State and Zip Code

Thebagelmaker@AOL.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Hayden at (850) 866 5550  
Name of Contact Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35.00 Filing Fee      ☐ \$43.75 Filing Fee & Certificate of Status  
☐ \$43.75 Filing Fee & Certified Copy      ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810

PROFIT CORPORATION  
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA  
(Pursuant to s. 607.1504, F.S.)

SECTION I  
(1-3 MUST BE COMPLETED)

F03000004948

(Document number of corporation (if known))

1. The Bagel Maker inc  
(Name of corporation as it appears on the records of the Department of State)

2. Nevada 3. 9/30/2003  
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II  
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_
5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

Wyoming  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

RALS WY LLC

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

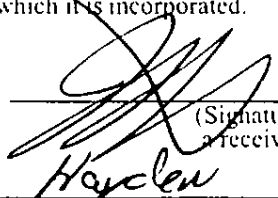
\_\_\_\_\_  
Signature of New Registered Agent, if changing

FILED  
2021 SEP 15 PM 12:01  
SEC. OF STATE  
TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

  
 \_\_\_\_\_  
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

James Hayden  
 \_\_\_\_\_  
 (Typed or printed name of person signing)

\_\_\_\_\_  
 (Title of person signing)

**FILING FEE \$35.00**

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that


**THE BAGEL MAKER INC.**

an entity originally organized under the laws of **Nevada** on **June 10, 2003** did on **May 2, 2016** apply for a Certificate of Incorporation and filed Articles of Domestication in the office of the Secretary of State of Wyoming. This entity has been assigned entity identification number **2016-000713391**.

I FURTHER CERTIFY that this profit corporation has renounced its state or country of organization, and is now organized under the laws of the State of Wyoming and is in good standing as of the date of this certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 12th day of September, 2021 at 8:55 AM. This certificate is assigned ID Number 046857738.



  
Secretary of State