# F2100001130

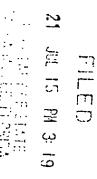
(F	Requestor's Name)		
(F	Address)		
(F	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(E	Business Entity Name)		
(0	Document Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			





800370011308

07/15/21--01018--028 \*\*70.00





## **COVER LETTER**

TO: Registration Division of	Section Corporations				
SUBJECT: Big B	ad American Motors Inc.				
30B3ECT	Name o	f corporation -	must include suffix		
Dear Sir or Madam:					
"Certificate of Exist		of Good Stand	uthorization to Transacting" and check are submain Florida.		
Please return all cor	respondence concernin	g this matter t	o the following:		
Scott Smith					
		Name of P	erson		
Royal Legal Solution:	5				
		Firm/Comp	any		
1100 Azie Morton Ro	ad, #1105				
		Addres	s		
Austin, TX 78704					
		City/State and	l Zip code		
production@royallega					
	E-mail address:	(to be used fo	r future annual report no	otification)	
For further informat	ion concerning this ma	tter, please ca	11:		
$\frac{\text{Scott Smith}}{\text{Name of Person}} = \text{at} \left(\frac{512}{\text{Area Code}}\right) \frac{871-0843}{\text{Daytime Telephon}}$					
Name of Pe	erson	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	for the following amore yable to: FLORIDA DE e S78.75 Filing Certificate of	PARTMENT ( Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Big Bad Americ	an Motors Inc.		
(Enter name of c	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORAT	ION."
(If name unavail	able in Fiorida, enter alternate corporate name	adopted for the purpose of transac	eting business in Florida)
2. Wyoming	y under the law of which it is incorporated)		<u> </u>
07/10/2021			
(Date	of incorporation) 5.	(Date of duration, if oth	er than perpetual)
6	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501). (Date first transacted business in transact	n Florida, if prior to registration) 502, F.S., to determine penalty lia	bility)
		ce street address)	12721
<del> </del>	(Current mailir	ig address, if different)	
8. Name and street Name:	et address of Florida registered agent: (P.C. Corporation Service Company	). Box <u>NOT</u> acceptable)	<b>&gt;</b>
Office Address:	1201 Hays Street		
	Tallahassee	Florida 32301	1 S - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	(City)	$\frac{32301}{\text{(Zip code)}}$	
Having been nam designated in this further agree to c	ent's acceptance:  led as registered agent and to accept servi application, I hereby accept the appointn omply with the provisions of all statutes r with and accept the obligations of my po	nent as registered agent and a elative to the proper and comp	gree to act in This capacity. I
Ę	LINDRY A Eich (Registered agent's s	gnature)	<del></del>

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS					
□Chairman	Name:	□Chairman	Maral Duckworth Name:		
□Vice Chairman	Address: 1100 Azie Morton Road #1105	□Vice Chairman	Address: 1100 Azie Morton Road #1105		
□Director	Austin, TX 78704	Director	Austin, TX 78704		
<b>■</b> President		□President			
□Vice President		□Vice President			
Secretary	□Treasurer	<b>■</b> Secretary	□Treasurer		
□Other		□Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□ Vice President		□Vice President	<del></del>		
□Secretary	□Treasurer	Secretary	□Treasurer		
□Other	Other	Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□ Secretary	Treasurer	☐ Secretary	□Treasurer		
□Other	Other	Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.					
12. Signature of Director or Officer					
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in					

## 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 according to the records of this office,

#### Big Bad American Motors Inc.

is a

### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **June 10, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001012140**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

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 22nd day of June, 2021 at 7:10 PM. This certificate is assigned ID Number 045400728.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.

This invoice must be completed in English

## **COMMERCIAL INVOICE**

EXPORTER: Tax ID#: Contact Name: Maral Duckworth Telephone No.: 850-245-6000 E-Mail: Candee@royallegalsolutions com Company Name/Address: Maral Duckworth 65 Adis Avenue			Ship Date: 23 Jun, 2021 Air Waybill No. / Tracking No. / Bill of Lading: 774075329360 Invoice No.: Purchase Order No.:					
HAMILTON ON Country/Territ Parties to Tran	ory : Canad nsaction: Non-R							
Burnan of Sh	inmant · k	lot Solit (Comm	armal)					
Purpose of Shipment: Not Sold (Commercial)  CONSIGNEE: Tax 108: Contact Name: Jessica Williams Telephone No.: 512-871-0843  E-Mail: Company Name/Address: Royal Legal Solutions 1100 Azie Morton Road #1105  AUSTIN TX 78704 Country/Territory: United States			SOLD TO (if different from Consignee):  Same as CONSIGNEE:  Tax IDII: Company Name/Address: Maral Duckworth 65 Adis Avenue  HAMILTON ON L9C6T9 Country/Territory, Canada					
If there is a de	signated br	oker for this si	hipment, please provide contact information	1				
Name of Broke	er Tal No	. Contact N	lame					
Duties and Tax	kes Payable	by 🗹 Expor	rter Consignee Other If Other, please	specify				
No. of Packages	No. of Units	Unit of Measure	Description of Goods		Harmonized Tariff Number	Country/Territory of Origin	Unit Value	Total Value
	4.00	PCS	Not Sold (Commercial) - Corporation Filing		491199	US	2.500000	10.00
Total No. of Pa	ickages : 1		Total Weight (Indicate LBS or KGS) :	1.00 lbs			Terms of Sale :	FCA
Special Instru	ctions :	-					Subtotal :	10.00
1							Insurance :	0.00
							Freight:	0.00
							Packing:	0.00
Declaration St	atement(s)						Handling : Other :	0.00
			Invoice Total :	10.00				
I declare that all the information contained in this invoice to be true and correct			Currency Code:	USD				
Originator or I	tame of Cor	npany Repres	entative if the invoice is being completed on bei	half of a company o	or individual :			
Signature / Tit	le / Date						23 Jun. 2021	