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(Business Entity Name)

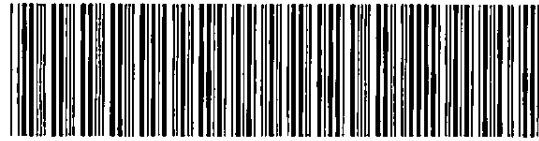
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TALLAHASSEE, FL

2024 MAY 17 AM 9:47

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 MAY 17 AM 11:06

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**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 5/16

CERTIFIED COPY

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INC

1. 8 INDUSTRIES, INC.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: 8 Industries, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Tyler Johnson

Name (Printed or typed)

3003 Tamiami Trail North, Ste. 400

Address

Naples, FL 34103

City, State & Zip

239-234-5034

Daytime Telephone number

fortunefoodz@gmail.com

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

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TALLAHASSEE, FL

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

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

ARTICLE I NAME

The name of the corporation shall be: 8 Industries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

7470 Inspira Circle

Naples, FL 34113

Mailing address, if different is:

7470 Inspira Circle

Naples, FL 34113

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sean Fortune Living Trust, President

Address 7470 Inspira Circle

Naples, FL 34113

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Threlkeld Law, P.A.

Address: 3003 Tamiami Trail North, Ste. 400

Naples, FL 34103

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tyler Johnson

Address: 3003 Tamiami Trail North, Ste. 400

Naples, FL 34103

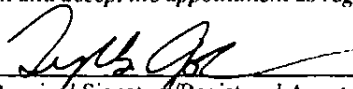
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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:


Required Signature/Registered Agent

5.17.2024
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.


Required Signature/Incorporator

5.17.2024
Date

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TALLAHASSEE FL