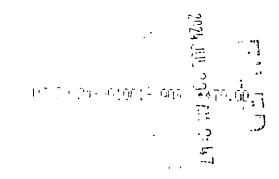
# P24000049242

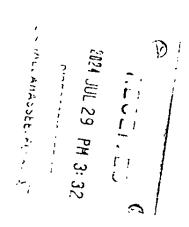
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
( <u></u> , <u>-</u> ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300433749483





## .CORPORATE ACCESS, \_

#### When you need ACCESS to the world

INC.

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 7/29	_
		CERTIFIED CO		·	
	XX	РНОТОСОРУ			
		GS			٠. ي
	XX	FILING	INC		(2) (4)
1.		28 LCKRA CORE			3
		(CORPORATE NAME AS	ND DOCUMENT #)		
2.					
		(CORPORATE NAME A)	ND DOCUMENT #)		, , <del>'                                 </del>
3.					
		(CORPORATE NAME AS	ND DOCUMENT#)	<del></del> · · ·	
4.					
		(CORPORATE NAME AS	ND DOCUMENT#)		
5.					
		(CORPORATE NAME A)	ND DOCUMENT #)		
6.					
		(CORPORATE NAME AS	ND DOCUMENT#)		
SPI	CIAI	L INSTRUCTIONS:			
				**	

#### **COVER LETTER**

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

SUBJECT: 28 LCKRA Corp.				
-	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	d a check for:	
☑ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
		L		
FROM: Ty	er Johnson	(Printed or typed)	<u> </u>	
	rame	(Finited of typed)		
300	3 Tamiami Trail North, Ste. 40	00		
	A	Address		
Na <sub>l</sub>	oles, FL 34103			
	City,	State & Zip	_	
239	-234-5034			
	Daytime To	elephone number		
sea	n@fortunefoodzconsultant.cor	n		
	E-mail address: (to be used	for future annual report r	notification)	

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 II PRINCIPAL OFFICE Principal street address		Mailing addre	ss, if different is:
50 S. Pine Island Rd.	· · · · · · · · · · · · · · · · · · ·		
Suite 300			
Plantation, FL 333	24		<del></del>
RTICLE III PURP	OSE the corporation is organized is: Any and	d all lawful purposes.	
ne purpose for winer	ine dorporation is organized is.		,
<del></del> -		<del></del>	
<del></del>			<del>-</del>
<u> </u>			
			•~1
	<del></del>		5.77
		· · · · · · · · · · · · · · · · · · ·	€., }_3
			":3 ?
RTICLE IV SHAR he number of shares of	<u>ES</u> stock is: 1,000		- ;
			· · · ·
-	AL OFFICERS AND/OR DIRECTORS		,
Name and Title	e: 8 Industries, Inc., President	Name and Title:	
Address	150 S. Plne Island Rd.	Address:	
	Suite 300		
	Plantation, FL 33324		
Name and Title	,	Name and Title:	
Name and Title			
Name and Title	·		
Address		Address:	
Address		Address:	

Name and Title:		Name and Title:	
Address		Address:	
		<del>_</del>	
	<u>REGISTERED AGENT</u> <u>lorida street address</u> (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Threlkeld Law, P.A.	the registered agent is.	
Address:	3003 Tamiami Trail North, Ste. 400	- -	
	Naples, FL 34103	-	
ARTICLE VII	INCORPORATOR		
	Idress of the Incorporator is:		,
Name:	Tyler Johnson		
Address:	3003 Tamiami Trail North, Ste. 400	_	, , , , , , , , , , , , , , , , , , ,
	Naples, FL 34103	-	; j
APTICE E VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	OPTIONAL	_)
	ate is listed, the date must be specific and canno		
	inserted in this block does not meet the applicable ffective date on the Department of State's records.	statutory filing requiremen	nts, this date will not be listed as
	ned as registered agent to accept service of process for		
cerajicate, i ani j	amiliar with and accept the appointment as register	eu agent ana agree to act tr	i inis capacity
	Sylled		July 26, 2024
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felony		
	Janes VI		July 26, 2024
Required Signatu	re/Incorporator		Date