F020000166

February 10, 2002

Florida Department of State Division of Corportions PO Box 6327 Tallahassee, FL 32314

Artist Management

Enclosed are completed documents and a check to register my foreign corporation in Florida.

Please forward the acknowledgement to me at:

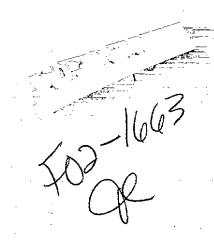
Kelly Muchoney TKO, Inc. 2381 Aloma Ave., Ste. 194 Winter Park, FL 32792 (407-644-6426

Please feel free to contact me should you have any questions concerning this matter. Thank you for your assistance.

Sincerely,

Kelly L. Muchoney

Enclosures



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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 12, 2002

KELLY MUCHONEY 2381 ALOMA AVENUE, SUITE 194 WINTER PARK, FL 32792

SUBJECT: TKO, INC.

Ref. Number: W02000004883

We have received your document for TKO, INC. and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name in your document is not available since it is the same as, or it is not distinguishable from the name of an existing entity. Therefore, the enclosed document cannot be filed and is being returned to you.

Enclosed is an application for refund. Please sign and return and allow at least 5 60 to 90 days for the refund to be processed.

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

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 202A00014811

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 20, 2002

KELLY MUCHONEY 2381 ALOMA AVENUE, SUITE 194 WINTER PARK, FL 32792

SUBJECT: TKO, INC.

Ref. Number: W02000004883

We have received your document for TKO, INC. and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 502A00010381

UZ APR -3 AM 9: 03

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	-u				
SUBJECT:	TKO	Artists, I			
(Name	of corporat	ion - must include suffix)		
Dear Sir or Madam:					
The enclosed "Application by Foreign Co "Certificate of Existence", and check are to transact business in Florida.	rporation fo submitted to	r Authorization to Transa register the above refere	act Business in Flo enced foreign corpo	orida", oration	
Please return all correspondence concerni	ng this matte	er to the following: Muchone of Person)	,		
	(Name c	of Person)	* · · · · · · · · · · · · · · · · · · ·	-	
			y · Verille		
	(Firm/C	ompany)		 	
2381 AL	ama	Ave. Ste.	194		2
	(Add	lress)			
Winter	PAN				
	(City/State	and Zip code)		**************************************	
	· •	• ,			
For further information concerning this ma	atter, please	call:		_	
Kelly L. Muchoney (Name of Person)	at (407	644-64	26	OZ AP SECRE ALLA!	;
(Name of Person)	(Area	Code & Daytime Teleph	one Number)	TAR ASS	-7-
				Y O	FILED
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ons	12 APR -3 AM 9: 03 ECRETARY OF STATE LLAHASSEE, FLORIDA	O
Enclosed is a check for the following amou	ınt:				
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Certificate of		3 \$78.75 Filing Fee & Certified Copy	S87.50 Filing Certificate of	of Status &	

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. 1. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607,1502 and 817.155, F.S.) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable Name: Office Address: Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature)

11. 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 under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTOI					
Address:	Kelly 1: Muchoney 191 1. Phelps Are.		 		
	Winter PANK, FR	32789			
Vice Chairman:				_	
Address:				-	
• • • • • • • • • • • • • • • • • • •					
Director:					
				- N	28 TOS
Director:			<u> </u>	- 15g	
Address:		<u> </u>	<u> 4</u>		_ =
					
B. OFFICERS					
President:	Kelly L. Muchoney		£	•	
Address:					
 				二四	02 A
Vice President:	Kelly L. Muchoney			ETAL	70 70
Address:		<u> </u>		ÄΫ́	LED A
		-	1	Γ΄ το '	ა
Secretary:	Kelly L. Muchoney		<u>:</u>		⊃ 2
Address:		<u></u>	<u>.i.,</u> -		
reasurer:	Kelly L. Mychoney		· · · · · · · · · · · · · · · · · · ·	de dans gra	<u> </u>
Address:			<u>.1 </u>		
IOTE: If never	gry you make that an addendant to the small of	or the state of the state of	~		
_	ary, you may attach an addendum to the application	n listing additional	officers and/	or directors.	
3	Signature of Chairman, Vice Chairman, or any offi	cer listed in number	12 of the an	olication)	<u> </u>
4	Kelly L. Muchon	<i>^</i>		and CEC	
	(Typed or printed name and capacity of pen	son signing applicati	on)	·	· · · · ·

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TKO, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF JANUARY, A.D. 2002.



Warriet Smith Windson, Secretary of State

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 1586307

DATE: 01-30-02

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