F19000000693

(Re	questor's Name)		
(Ad	dress)	_	
(Ad	dress)	,	
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Na	me)	
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		
_		.,]	
W18-10786:	2 NOT A	Vail+RA su	n

Office Use Only



200321196852

12/03/18--01040--009 **70.00

FILED

19 FEB -7 PH ID: 20
SECRETARY OF STATE

SALY
FEB - 8 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 14, 2018

MARY CLEMENS TKC HOLDINGS, INC. 1260 ANDES BLVD. SAITN LOUIS, MO 63132

SUBJECT: TKC HOLDINGS, INC. Ref. Number: W18000107862

We have received your document for TKC HOLDINGS, INC. and your check(s) totaling \$70.00. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L12000089508 "TKC HOLDINGS, LLC".

The registered agent must sign accepting the designation.

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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 518A00025723

COVER LETTER

TO:	Registration Section					
	Division of Corporations					
	TKC Holdings, Inc.					
SUBJ	IECT:	e of corporation	n must in	soludo auffix		
	Name	e or corporation	n - must in	iciude surrix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign (ficate of Existence," or "Certifical referenced foreign corporation to	te of Good Sta	nding" and	d check are sul		
	return all correspondence concer Clemens	ning this matte	er to the fo	llowing:		
		Name of	Person			
TKC F	doldings, Inc.					
		Firm/Cor	npany			
1260	Andes Blvd.		. ,			
		Addı	ess			
St. Lo	uis, MO 63132					
	CH L LE	City/State	and Zip co	de		
mcien	nens@tkcholdings.com					
	E-mail addre	ss: (to be used	for future	annual report	notification)	
For fu	rther information concerning this	matter, please	call:			
Mary Clemens		314	215-2	215-2785		
	Name of Person	at (Area Coo) te	Daytime Teler	phone Number	
	rane of reison	Area coo		Daytime Telep	mone (value)	
	STREET/COURIER ADDRE	SS:		MAILING A		
Registration Section Division of Corporations Clifton Building				Registration Section Division of Corporations		
			P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, FL 32314		
Enclos	sed is a check for the following ar	nount:				
□ \$7	0.00 Filing Fee			Filing Fee & ed Copy	S87.50 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. TKC Holdings, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Trinity Keefe Holdings, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 81-2608849 (State or country under the law of which it is incorporated) (FEI number, if applicable) 12/11/2015 perpetual (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1260 Andes Blvd., St. Louis, MO 63132 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: **Plantation** , Florida

9. 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.

(Zip code)

Kristin Bolden
Assistant Secretary

(Registered agent's signature)

(City)

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 under the law of which it is incorporated.

II. Nam	nes and business addresses of officers and/or directors:	FILED 19 FEB - 7 PH D: 20
A. DIRI	ECTORS	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Chairman		TALLAMASSE STATE
Address:	1260 Andes Blvd.	- FLORIDA
	Saint Louis, MO 63132	
Vice Chai	Christopher Alberta - Director	
Address:	1260 Andes Blvd.	
	Saint Louis, MO 63132	
Director:	Jeff Zanarini	
Address:	1260 Andes Blvd.	
	Saint Louis, MO 63132	
Director:	Brian Schwartz	
Address:	1260 Andes Blvd.	
riddiess.	Saint Louis, MO 63132	
B. OFFI	ICFRS	
President:	left Zanarini	
Address:	1260 Andes Bivd.	
	Saint Louis, MO 63132	
Vice Presi	dent: Christopher Alberta-Chief Executive Officer	
Address:	1260 Andes Blvd.	
	Saint Louis, MO 63132	
Secretary:	Alexander S. Y. Lee	
Address:	1260 Andes Blvd., Saint Louis, MO 63132	
Treasurer:	Joshua Siano - Chief Financial Officer	
Address:	1260 Andes Blvd., Saint Louis, MO 63132	
NOTE: 12	If necessary, you may attach an addendum to the application listing additional off	ficers and/or directors.
The offic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirm that he or she is aware that false information submitted in a document to the Degree felony as provided for in s.817.155, F.S.	ms that the facts stated herein Department of State constitutes
13Ale	xander S.Y. Lee, Corporate Secretary	
	(Typed or printed name and capacity of person signing application	n)

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TKC HOLDINGS, 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 FIRST DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TKC HOLDINGS,

INC." WAS INCORPORATED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

19 FEB -7 PH ID 20
SECNETIVES OF STATE

Authentication: 203820273

Date: 11-01-18

5905714 8300 SR# 20187431522