

F21000000098:

(Requestor's Name)

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(City/State/Zip/Phone #)

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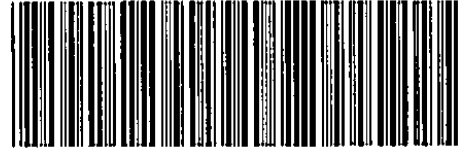
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01/25/21--01041--004

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: T.K.O SALES INC  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dayana C. Zarate  
Name of Person  
TKO SALES Inc  
Firm/Company  
1700 NW 18th St, Suite 903  
Address  
Pompano Beach, FL 33069  
City/State and Zip code  
info@tkosales.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dayana C. Zarate at ( 561 ) 592.9244  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee & Certificate of Status

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
BUSINESS IN FLORIDA

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

1. T.K.O. SALES INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

TKO SALES Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business i

2. Ohio

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. 10/01/2018

(Date of incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetu

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1700 NW 18st Suite 903 Pompano Beach, FL 33

(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Dayana C. Zarate

Office Address:

20984 Uptown Ave Apt 506

Boca Raton

(City)

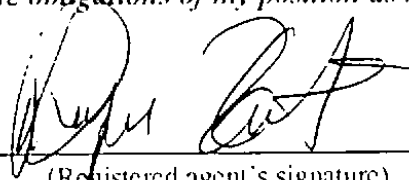
Florida

33428

(Zip code)

9. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporat  
designated in this application, I hereby accept the appointment as registered agent and agree to act in  
further agree to comply with the provisions of all statutes relative to the proper and complete perform  
and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of  
the Department of State, by the Secretary of State or other official having custody of corporate records i  
under the law of which it is incorporated.

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

A. DIRECTORS

☐ Chairman Name: Dayana Zarate  
☐ Vice Chairman Address: 20989 Uptown Ave  
☐ Director Apt 506 Boca Raton  
☐ President FL, 33428  
☒ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treas  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treas  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treas  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes or individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. [Signature] 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 as she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as s 817.155, F.S.

13. Dayana Zarate  
 (Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified present acting Secretary of State for the State of Ohio, and as such have access to the records of Ohio and Foreign business entities; that said records show that T.K.O. SALES INC., an Ohio corporation, Charter No. 4219666, having its principal location in Pickerington, County of Fairfield, was incorporated on October 1, 2018 and is currently in GOOD STANDING upon the records of this office.*



*Witness my hand and the seal of the Secretary of State at Columbus, Ohio  
this 22nd day of January, A.D. 2021*

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202102203014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 31, 2021

DAYANA C. ZAVOTE *ZABATE*  
1700 NW 18TH ST STE 903  
POMPANO BCH, FL 33069 US

SUBJECT: T.K.O. SALES INC  
Ref. Number: W21000009983

We have received your document for T.K.O. SALES INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 521A00002183

**RECEIVED**

FEB 16 2021