



**COMMONWEALTH OF KENTUCKY**  
**MICHAEL G. ADAMS, SECRETARY OF STATE**

**1276434.06**mmore  
ADD

**Michael G. Adams**  
**Kentucky Secretary of State**  
Received and Filed:  
4/21/2023 1:09 PM  
Fee Receipt: \$90.00

**Division of Business Filings**  
P.O. Box 718  
Frankfort, KY 40602  
(502) 564-3490  
[www.sos.ky.gov](http://www.sos.ky.gov)

**Certificate of Authority**  
(Foreign Business Entity)

Pursuant to the provisions of KRS 14A – 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a:  profit corporation  nonprofit corporation  professional limited liability company  
 business trust  limited liability company  statutory trust  
 limited partnership  ltd cooperative association  public benefit corporation  
 non-profit llc  professional service corporation  other

2. The name of the entity is TKC Hospitality Group LLC  
(The name must be identical to the name on record with the Secretary of State.)

3. The name of the entity to be used in Kentucky is (if applicable): \_\_\_\_\_  
(Only provide if "real name" is unavailable for use; otherwise, leave blank.)

4. The state or country under whose law the entity is organized is Delaware

5. The date of organization is April 4, 2023 and the period of duration is \_\_\_\_\_  
(If left blank, duration is considered perpetual.)

6. The mailing address of the entity's principal office is  
230 Pisgah Pike Versailles KY 40383  
Street Address City State Zip Code

7. The street address of the entity's registered office in Kentucky is  
828 Lane Allen Road Suite 219 Lexington KY 40504  
Street Address (No P.O. Box Numbers) City State Zip Code

and the name of the registered agent at that office is Cog ency Global Inc.

8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):

Wes Henderson 230 Pisgah Pike Versailles KY 40383  
Name Street or P.O. Box City State Zip Code

Name Street or P.O. Box City State Zip Code

Name Street or P.O. Box City State Zip Code

9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:

12. If a limited liability company, check box if manager-managed:

13. This application will be effective upon filing.

Wes Henderson Wes Henderson, President 4/20/2023  
Signature of Authorized Representative Printed Name & Title Date

I, Cogency Global Inc., consent to serve as the registered agent on behalf of the business entity.  
Type/Print Name of Registered Agent

Karen McKeown Karen McKeown Assistant Secretary 4/21/2023  
Signature of Registered Agent Printed Name Title Date