

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name . C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878~5926

FOREIGN PROFIT/NONPROFIT CORPORATION

Sally Beauty Holdings, Inc.

Certificate of Status	0
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Corporate Filing Menu

Help

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.

Sally Beauty Ho	mings, inc.		
	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida) 36-2257936 (FEI number, if applicable) Perpetual (Duration: Year corp. will cease to exist or "perpetual")
. Delaware		з.	36-2257936
	under the law of which it is incorporated)	•	(FEI number, if applicable)
06/16/2006		5.	Perpetual
	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")-
01/09/2007			
****			n Florida, if prior to registration) 502, F.S., to determine penalty liability)
3001 Colorado	Blvd, Denton, TEXAS 76210		
	(Principal office	addı	ress)
same	·		<u> </u>
	(Current mailing	add	ress)
	(Current mailing	add	reas)
SEE ATTACHI	,	add	ress)
	,		<u> </u>
(Purpose(s	MEN'T	nt CO	ountry to be carried out in state of Florida)
(Purpose(s	MENT) of corporation authorized in home state (nt CO	ountry to be carried out in state of Florida)
. Name and stree	MENT) of corporation authorized in home state of address of Florida registered agent; (nt CO	ountry to be carried out in state of Florida)
(Purpose(s Name and street Name:	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road	nt CO	ountry to be carried out in state of Florida) D. Box NOT acceptable)
(Purpose(s Name and <u>street</u> Name:	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation	nt CO	Duntry to be carried out in state of Florida) D. Box NOT acceptable) , Florida
(Purposets Name and street Name: Office Address:	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation (City)	nt CO	ountry to be carried out in state of Florida) D. Box NOT acceptable)
(Purpose): Name and street Name: Office Address:	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation (City)	л со Р.С	Dunitry to be carried out in state of Florida) D. Box NOT acceptable) , Florida
(Purpose): Name and stree Name: Office Address: O. Registered as laving been name	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation (City) cent's acceptance: and as registered agent and to accept we	P.C	Dunitry to be carried out in state of Florida) D. Box NOT acceptable) , Florida
(Purpose): Name and street Name: Office Address: D. Registered as laving been namesignated in this	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ad as registered agent and to accept sea application, I kereby accept the appoint	P.C	Deputity to be carried out in state of Florida) D. Box NOT acceptable) , Florida
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(Purpose): Name and street Name: Office Address: O. Registered at laving been name estimated in this uniter agree to co	MENT) of corporation authorized in home state of address of Florida registered agent; (C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ad as registered agent and to accept sea application, I kereby accept the appoint	r co P.C	Deputity to be carried out in state of Florida) D. Box NOT acceptable) , Florida
(Purpose): Name and street Name: Name: Office Address: O. Registered at laving been namesignated in this orther agree to continue to cont	AENT) of corporation authorized in home state of address of Florida registered agant; (CT Corporation System 1200 South Pine Island Road Plantation (City) sent's acceptance: ad as registered agant and to accept sea application, I hereby accept the appointment of all statute with and accept the obligations of my	r co P.C	Description of the carried out in state of Florida) Description of Florida Description of Florida Description of Florida See of process for the above stated corporation at the planent as registered agent and agree to act in this capacity clative to the proper and complete performance of my desition as registered agent.
(Purpose): Name and street Name: Pffice Address: Registered as laving been names ignated in this critical articles agree to contact the contact agree to contact the contact agree to contact ag	AENT) of corporation authorized in home state of address of Florida registered agant; (CT Corporation System 1200 South Pine Island Road Plantation (City) sent's acceptance: ad as registered agant and to accept sea application, I hereby accept the appointment of all statute with and accept the obligations of my	r co P.C	Description of the carried out in state of Florida) Description of Florida Description of Florida Description of Florida Description of the above stated corporation at the planent as registered agent and agree to act in this capacity clative to the proper and complete performance of my desired as registered agent. Michael E. Jones
(Purpose): Name and stree Name: Office Address: O. Registered at laving been name esignated in this uniter agree to co	AENT) of corporation authorized in home state of address of Florida registered agant; (CT Corporation System 1200 South Pine Island Road Plantation (City) sent's acceptance: ad as registered agant and to accept sea application, I hereby accept the appointment of all statute with and accept the obligations of my	rt co P.C P.C	Description of the carried out in state of Florida) Description of Florida Description of Florida Description of Florida See of process for the above stated corporation at the planent as registered agent and agree to act in this capacity clative to the proper and complete performance of my desition as registered agent.

11. Attached is a cortificate 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:

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A. DIRECTORS SEE ATTACHMENT	SECRETERY OF ATT
Chairman: James Berges	SECKETARY OF STATE FALLAHASSEE, FLORIDA
Address: 375 Park Avenue, 18th floor	, comp
New York, NY 10152	
Vice Chairman:	
Address:	
· · · · · · · · · · · · · · · · · · ·	
Director: John Miller	
Address: 2101 Claire Ct.	
Glenview, IL 60025	
Director: Richard J. Schnall	
Address: 375 Park Avenue, 18th floor	
New York, NY 10152	
B. OFFICERS SEE ATTACHMENT	
President: Gary Winterhalter	
Address: 3001 Colorado Blvd.	·
Denton, TEXAS 76210	
Vice President: Mark Faulkner	:
Address: 3001 Colorado Blvd.	
Denion, TEXAS 76210	
Secretary: Real Roos	
Address: 3001 Colorado Blvd., Donton, TEXAS 76210	
Treasurer: Cary Robinson	
Address: 3001 Colorado Blvd., Denson, TEXAS 76210	
NOTE: If necessary, you may attach an addendum to the application listing additional offi	cers and/or directors.
13. Signature of State of Office Head In the Off	
(Signature of Discotor or Officer listed in number 12 of the application 14. Rank Roop, Secretary	
(Typed or printed name and capacity of person signing application))

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Attachment to Florida,

Purpose Clause

SLORETARY OF STATE TALLAHASSEE, FLORIDA The nature of the business of the Corporation and its purpose is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of the State of Delaware.

Officers & Directors

1 Full Name: W. Richard Dowd

3001 Colorado Blvd.

Officer/Director:

Officer

Officer's Title:

Sr. VP. Distribution & CIO

Director's Title:

Business Address:

Denton

City:

State:

TEXAS

ZIP Code:

76210

Full Name:

Matthew Haltom

Officer/Director:

Officer

Officer's Title:

Assistant Secretary

Director's Title:

Business Address:

3001 Colorado Blvd.

City:

Denton

State:

TEXAS

ZIP Code:

76210

Full Name: 3

Daniel J. Connors

Officer/Director:

Officer

Officer's Title:

Sr. V.P. of Business Development &

Strategic Planning

Director's Title:

Business Address:

3001 Colorado Blvd.

City:

Denton

State:

TEXAS

ZIP Code:

76210

Full Name:

Sandy J. Martin

Officer/Director:

Officer

Officer's Title:

Vice President of Investor Relations

Director's Title:

Business Address:

3001 Colorado Blvd.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

City:

State:

ZIP Code:

Full Name:

Officer/Director: Officer's Title:

Director's Title:

Business Address:

City: State:

ZIP Code:

6 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

State:

ZIP Code:

City:

7 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City: State:

ZIP Code:

Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City: State:

ZIP Code:

Denton

TEXAS 76210

Kevin Oldham

Officer

Vice President of Tax & Assistant Treasurer

3001 Colorado Blvd.

Denton

TEXAS

76210

Gary Winterhalter

Director

Director

3001 Colorado Blvd.

Denton

TEXAS

76210

Donald J. Gogel

Director

Other Director

375 Park Avenue, 18th floor

New York

NY

10152

Bob McMaster

Director

Other Director

2695 Sandover Rd.

Columbus

OH

43220

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

9 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City:

State:

ZIP Code:

10 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City:

State: ZIP Code:

11 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City:

State:

ZIP Code:

12 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City:

State:

ZIP Code:

Full Name:

Officer/Director:

Officer's Title:

Ed Rabin

Director

Other Director

179 E. Lake Shore Drive # 102

Chicago

ΪL

60611

Walter Metcalfe

Director

Other Director

211 N. Broadway, Suite 3600

St. Louis

MO

63102

Kathy Affeldt

Director

Other Director

164 S. Shore Dr. # 503

Hilton Head

SC

29928

Marshall Eisenberg

Director

Other Director

2 North La Salle

Chicago

ΙL

60602

Martha Miller de Lombera

Director

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Director's Title:

Other Director

SECKETARY OF STATE TALLAHASSEE, FLORIDA

Business Address:

Lorenzo de la Hildalga 416 B-12

City:

Bosque de Santa FE San Mateo Tlatitenango

State:

MEXIC

ZIP Code:

05600 D.F.

14 Full Name:

Ed Rabin

Officer/Director:

Director

Officer's Title:

Director's Title:

Other Director

Business Address:

179 E. Lake Shire Drive # 102

City:

Chicago

State:

ΠL

ZIP Code:

60611

Delaware

DACE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SALLY BEAUTY 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 ELEVENTH DAY OF JANUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

07 JAN 12 PM 12: 16
SECRETARY OF STATE

4176666 8300 070034530



Harriet Smile Stindson Harriet Smir Windson, Secretary of State

AUTHENTICATION: 5346916

DATE: 01-11-07