Page 1 of 1 Law sagment of the

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002173243)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

submission data es fila data

From:

: CORPORATION SERVICE COMPANY . Account Name

Account Number : 12000000195 Phone

: (850)521-1000

Fax Number

: (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION
POP BEAUTY, INC.

Certificate of Status

Certificate of Status	0
Certified Copy	1
Page Count	6607
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

1 SHAVERS SEP U.8

Fax Server . 850-617-6381

9/7/2011 1:16:14 PM PAGE 2/007 Fax Server 9/2/2011 11:29:22 AM PAGE 1/001 Fax Server



September 2, 2011

FLORIDA DEPARTMENT OF STATE Division of Corporations

CORPORATION SERVICE COMPANY

SUBJECT: POP BEAUTY, INC.

REF: W11000045602

RESUBMIT

Please give original submission data as its data.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The officer signing name and address must be listed on the application.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section FAX Aud. #: H11000217324 Letter Number: 411A00020504 A Company of the Company of the Company

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Pop Beauty, Inc.	
Name of corporation - must include s	suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence," or "Certificate of Good Standing" and check above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following	; :
Dana L. Redburg	
Name of Person	
Barack Ferrazzano Kirschbaum & Nagelb	perg LLP
Firm/Company	
200 West Madison Street, Suite 3900	
Address	
Chicago, Illinois 60606	The state of the s
City/State and Zip code	
corporateservices@bfkn.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, please call:	
Dana L. Redburg at (312) 629-51	
Name of Person Area Code & Daytime	: Telephone Number
New Filing Section New F Division of Corporations Division Clifton Building P.O. B	LING ADDRESS: Ciling Section on of Corporations Box 6327 assec, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee \$ S78.75 Filing Fee Certificate of Status	See & \$87.50 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.

(Enter name of	corporation; must include "IN	CORPORATED," "CO	MPANY," "CORPORATION,"	++19-,
"Inc.," "Co.," "	Corp," "Inc," "Co," or "Corp."	•		
(If name unava	ilable in Florida, enter alternate		for the purpose of transacting busing	
2	Delaware	3	20-3672908 (FEI number, if applicable	
(State or country	y under the law of which it is in	icorporated)	(FEI number, if applicable)
	ugust 24, 2005	5	Perpetual tion: Year corp. will cease to exist o	
(Da	te of incorporation)	(Dura	tion: Year corp, will cease to exist a	or "perpetual")
6				
			a, if prior to registration) ., to determine penalty liability)	
7606	5 Bristol Parkway, Suite	100, Culver City, Ca	lifornia 90230	
	(Pri	ncipal office address)		
606	5 Bristol Parkway, Suite		lifornia 90230	-awk
	(Cu	rent mailing address)		D 39
The transaction o	f any and all lawful business for w	hich corporations may be i	ncorporated under the laws of this state.	SS
8(Purpose	(s) of corporation authorized in	home state or country to	be carried out in state of Florida)	
9. Name and stre	eet address of Florida registe	red agent: (P.O. Box	NOT acceptable)	
Name:	Corporation Service C	ompany		
Office Address:	1201 Hays Street			9: S
	Tallahassee		Florida 32301	,s G
	(City)		(Zip code)	
10 Designation	·····		•	
	igent's acceptance: ned us registered agent and	to accept service of p.	rocess for the ubove stated corpo	rution at the place
designated in thi	s application, I hereby acce	pt the appointment as	registered agent and agree to ac	et in this capacity. I
juriner agree to c and I am familia	comply with the provisions (If with and accept the obliga	of all statutes relative utions of my position t	to the proper and complete perfors registered agent.	rmance of my duties,
J	Corporation Service Con		•	
	By: Lad	MKIM	Harry B. D Asst. Vice Pro	avis esident
-	(Registered as	gent's signature)		
		5		•

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. DIRECTORS				
Chairman: See attached list of Directors.				
Address:				
		· ·		
Vice Chairman:	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	····/		
Address:				
Director:				
Address:	. , <u> </u>			
				
Director:				
Address:				
B. OFFICERS	30			
President: See attached list of Officers	्रिच् रक्ष रूच्या	SE .		
Address:	14	1 1		
	M1 0	,		
Vina Pracidant	CH			
Vice President:	ilo -	Ω <u>ত্</u>		
Address:		<u> </u>		
Secretary:				
Address:				
Treasurer:				
Address:				
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or	directors.			
13.				
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fa				
are true and that he or she is aware that false information submitted in a document to the Department of third degree felony as provided for in s.817.155, F.S.				
A. P. Oppe, CEO, Secretary and Treasurer				
(Typed or printed name and capacity of person signing application)				

POP BEAUTY, INC.

ATTACHMENT TO FLORIDA QUALIFICATION

ITEM 12A: Directors.

<u>Name</u>

<u>Address</u>

Petra Strand Oppe

6065 Bristol Parkway, Suite 100 Culver City, California 90230

ITEM 12B: Officers.

<u>Name</u>	<u>Office</u>	<u>Address</u>
A.P. Oppe	CEO, Secretary and Treasurer	6065 Bristol Parkway Suite 100 Culver City, California 90230
Petra Strand Oppe	Chairman and Creative Director	6065 Bristol Parkway Suite 100 Culver City, California 90230
Andrew Knox	President and Chief Operating Officer	6065 Bristol Parkway Suite 100 Culver City, California 90230
Gretchen A. Trofa	Assistant Secretary	200 W. Madison Street Suite 3900 Chicago, IL 60606

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "POP BEAUTY, 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 AUGUST,
A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POP BEAUTY, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2005.

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

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

20 SEP -1 AM 9: 58

4020393 8300

110912788

AUTHENTY CATION: 8964682

DATE: 08-11-11

You may verify this certificate online at corp.delaware.gov/authver.shtml