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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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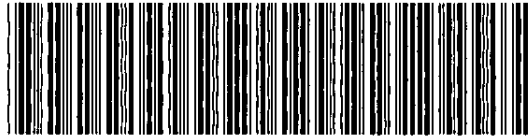
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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S Warren

APR 20 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 606281 5053877
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 70.00

ORDER DATE : April 19, 2017
ORDER TIME : 12:45 PM
ORDER NO. : 606281-025
CUSTOMER NO: 5053877

FOREIGN FILINGS

NAME: ULTA BEAUTY CREDIT
SERVICES CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

**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.*

1. Ulta Beauty Credit Services Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 36-4832212
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 18, 2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. C/O Tax Department 1000 Remington Blvd, Suite 120, Bolingbrook, IL 60440
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: Corporation Service Company
1201 Hays Street
Office Address: Tallahassee, Florida 32301
(City) (Zip code)

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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.

Corporation Service Company
By: _____

(Registered agent's signature)

Harry B. Davis
Asst. Vice President

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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mary N Dillon

Address: 1000 Remington Blvd, Suite 120, Bolingbrook, IL 60440

Vice Chairman:

Address:

Director: Scott M Settersten

Address: 1000 Remington Blvd, Suite 120, Bolingbrook, IL 60440

Director: David Kimbell

Address: 1000 Remington Blvd, Suite 120, Bolingbrook, IL 60440

B. OFFICERS

President: David Kimbell

Address: 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440

Vice President: Jodi Snedigar

Address: 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440

Secretary: Jodi J Caro

Address: 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440

Treasurer: Scott M Settersten

Address: 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

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 are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Jodi Snedigar, Vice President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ULTA BEAUTY CREDIT SERVICES CORPORATION" 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 NINETEENTH DAY OF APRIL, A.D. 2017.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ULTA BEAUTY CREDIT SERVICES CORPORATION" WAS INCORPORATED ON THE EIGHTEENTH DAY OF MARCH, A.D. 2016.

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



5992180 8300

SR# 20172615111

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202397232

Date: 04-19-17