DOCUMENT # F95000006247

SALLY BEAUTY DISTRIBUTION, INC.

May 10, 2000 8:00 am Secretary of State 05-10-2000 90143 039 ***150.00

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Principal Place of Business Mailing Address											
DENTON TX 76208			2525 ARMITAGE AVENUE C/O TAX DEPARTMENT MELROSE PARK IL 60160-1125 US								
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	DO NOT WRIT	E IN THIS	SPACE		
City & State			City & State			4. FEI Number 75-2624245 Applied For Not Applicate]
Zip	-	Country	Zip Count		try	5. Certificate of Status Desired See Requir		Additional	٦		
6. Name and Address of Current			Registered Agent			7. Name and Address of New Registered Agent					┨
	0. 112111	and Address of Carrent II	ygiotorou Agont		Name].
		TION SYSTEM VINE ISLAND ROAD	Street Address			(P.O. Box Number is Not Acceptable)					-
	ANTATION F										
					City		r	FI	Zip C	ode	
8. The abov	e named enti	ty submits this statement for t	he purpose of changing i	its register	ed office or regist	tered ag	gent, or both, in the State of Flo	rida.			
SIGNATURE								5.475			
	Signature, type	d or printed name of registered agent and	title if applicable. (NO	OTE: Registere	d Agent signature requi	ired when re	einstating)	DATE			4
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of St				10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees				
11.	-	OFFICERS AND D	IRECTORS	12.		AD	ODITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	ORS IN 11	╛.
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NAME	LAVIN, L	LAVIN, LEONARD H		E						9	
STREET ADDRESS 2525 ARMITAGE AVE					ET ADDRESS						[2
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	r oortier spot s	ha information auroplied with the	his filing does not qualify	for the eve	motion stated in	Section	119 07(3)(i) Florida Statutes	L further o	ertify that th	ne information	╛
	y certify that the don this report or poration or at or an at	LIA he information supplied with the conformation supplemental report is a the receiver or trustee empowers. With an address, with an address, with an address, which ment with an address, which we have the conformation of the	his filing does not qualify the and accurate and that when to execute this report thall other like empowers			Section ne same 607, Flor	119.07(3)(i), Florida Statutes. legal effect as if made under ida Statutes; and that my nam	I further coath; that eappears	ertify that that the lam an official in Block 1	ne information cer or director 1 or Block 12 if	_