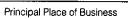
2003 LIMITED LIABILITY COMPANY, UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000013303

1. Entity Name

HAIRCOLORXPRESS DEVELOPMENT PARTNERS OF ARIZONA/ NEVADA, LLC



Mailing Address

16507-D NORTHCROSS DRIVE HUNTERSVILLE NC 28078 16507-D NORTHCROSS DRIVE

FILED Aug 13, 2003 8:00 am Secretary of State

08-13-2003 90048 010 ****55.00

HUNTERSVILLE NC 28078		HUNTERSVILLE NC 28078									
	lace of Business Birkdale Commons PK	3. Mailing Address	dale (on	uas Pr	(W)						
Suite, Apt.		Suite, Apt. #, etc. Suite 210		AFFORMS V		CHE	CK HERE IF	MAKING (CHANGES	;	
Gity & State	tersville, NC	City & State Huntersvill	e NC	,	4. FEI Number 045292			Applied For Not Applicable			}
<u> 2</u> 80	78 Country USA	3,8018	Country	١		ite of Status		F	5.00 Added Require		
	6. Name and Address of Current I	Registered Agent			7. Name a	nd Address	of New Reg	istered Ag	jent		4
SHO 3164 BOC	Stree	3	O. Box Num	ber is Not A	cceptable)		7-1-1-1		-		
			City	Dela	CUI	Bea	ch	FL	Zip Cod	มู่ใด]
the obligati	named entity submits this statement for ons of registered agent. Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent sig	nature required	ed agent, or t			a. I am far	niliar with,	and accept	
	*	Make Check Payable Due By	September 2	epartmen	t of State						
9.	MANAGING MEMBER		10.		0	AE	DITIONS/CH				1=
TITLE NAME STREET ADDRESS CITY-ST-ZIP	å.	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP		~	rk dol	e Comn NC	t enan	□ Change PKwy: 8078	Addition Size alice	2E083 (4/03)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8 1624 War		dale	Com		Change	Paddition	8
TITLE NAME		Delete	TITLE	-BC	> ~	lahor	yau!		Change	Addition	_
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		<u> 28</u> € € € € € € € € € € € € € € € € € € €	AZ.	5000 85	1	·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5	•				□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· .	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.			••	Ĺ	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						☐ Change	☐ Addition	
maicalea (ertify that the information supplied with to this report is true and accurate and the illity company or the receiver or trustee of	iai my signature shall nave th	e same legal et	tect as it ma	ide under ogt	h∙that Iam	Statutes. I fur a managing	ther certify member o	that the in or manager	formation r of the	