

| (Red | questor's Name) | |
|---------------------------|-------------------|-------------|
| (Add | lress) | |
| (Add | lress) | |
| (City | /State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
| , | | |
| , | | |
| | | |

Office Use Only



100083584331

01/10/07--01023--001 **35.00

SECRETARY OF STATIONS DIVISION OF CORPORATIONS 21

B1/12/07



FILING REQUEST

January 4, 2007

FLORIDA DEPARTMENT OF STATE

Type of Filing:

CHANGE OF AGENT

Subject(s):

GREAT CLIPS, INC.

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED OFFICE / AGENT

Supporting Document(s):

NONE

Check Enclosed:

YES - CHECK# 25194 FOR \$35.00

Return Via:

REGULAR MAIL - SASE ATTACHED

Filing Method:

ASAP

PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Melissa Hobbs

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Minnesota er to change its registered office or registered agent, or both, in the State of Florida. | |
|--|--|-----------------|
| 1. The name of | the corporation: Great Clips, Inc. | |
| 2. The principal | l office address: 7700 France Avenue South, Suite 425, Minneapolis, MN 55435 | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | rporation/qualification: 02/02/1984 Document number: P00805 | |
| 5. The name and | nd street address of the current registered agent and registered office on file with the artment of State: | |
| | CT Corporation System | 2 |
| | 1200 S Pine Island Road | 181 J |
| | Plantation, FL 33324 | 2007 JAN 10 |
| 6. The name and (if changed): | od street address of the new registered agent (if changed) and /or registered office NRAI Services, Inc. | AM 10: 22 |
| | 2731 Executive Park Drive, Suite 4 (P.O. Box NOT acceptable) Weston, FL 33331 | 8 |
| The street addreas changed will | ress of its registered office and the street address of the business office of its registered ager Il be identical. | ıt, |
| Such change w authorized by t | vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. | |
| Sondra (Signat | Sandra A. Trenda, Secretary (Printed or typed name and title) | - |
| I hereby accept I further agree of my duties, ar document is be corporation ha | nt the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performan Ind I am familiar with and accept the obligation of my position as registered agent. Or, if t Priving filed merely to reflect a change in the registered office address, I hereby confirm that the Inside the same is a writing of this change. | ce his he |
| Merira | Signature of Registered Agent) 12/21/206 (Date) | - |
| If signing on be | ehalf of an entity: | |
| | lobbs, Asst Secretary | |
| (| (Typed or Printed Name) | |

* * * FILING FEE: \$35.00 * * *