

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000004032

Entity Name: ORIBE HAIR CARE, LLC

Current Principal Place of Business:

665 BROADWAY SUITE 502
NEW YORK, NY 10012

Current Mailing Address:

665 BROADWAY SUITE 502
NEW YORK, NY 10012 US

FEI Number: 26-1182686

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
SUITE 508
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	FINGER, TEVYA	Name	KANER, DANIEL
Address	665 BROADWAY SUITE 502	Address	665 BROADWAY SUITE 502
City-State-Zip:	NEW YORK NY 10012	City-State-Zip:	NEW YORK NY 10012

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL KANER

MANAGER

04/08/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date