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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL D BROOKS

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address: 12700 INDUSTRIAL PARK BLVD

Current Principal Place of Business:

MINNEAPOLIS. MN 55441

DOCUMENT# F11000003242

12700 INDUSTRIAL PARK BLVD MINNEAPOLIS. MN 55441

FEI Number: 41-1748342

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Officer/Director Detail : DVST Title Title DP Name BROOKS, MICHAEL Name KUNINS, MICHAEL Address 12700 INDUSTRIAL PARK BLVD Address 12700 INDUSTRIAL PARK BLVD City-State-Zip: MINNEAPOLIS MN 55441 City-State-Zip: MINNEAPOLIS MN 55441

TREASURER

03/18/2015

FILED Mar 18, 2015 Secretary of State CC5454426042

Certificate of Status Desired: No

Date

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Entity Name: HAIRSTYLIST MANAGEMENT SYSTEMS, INC.

Date