

## CERTIFICATE OF AUTHORITY OF

GIOVANNI'S.	INC.	

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that					
duplicate originals of an Application of					
for a Certificate of Authority to transact business in this State,					
duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have					
been received in this office and are found to conform to law.					
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of					
Authority to GIOVANNI'S, INC.					
to transact business in this State under the name GIOVANNI'S, INC.					
and attach hereto a duplicate original of the Application					
for such Certificate.					
Dated May 7, 1986					

OH OH

SECRETARY OF STATE

Corporation Clerk

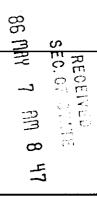
## APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

o the Secretary of State of Idah Pursuant to Section 30-1-11 uthority to transact business in	0, Idaho Code, the und		ereby applies for Cert	ficate of
. The name of the corporation	•	• •		0.50
	·			7.1 7.1 - 1.7
. The name which it shall use in	n Idaho is GIOVAN	NI'S , INC.	တ	, ; ; ,
. The hame which it blain use i			46	
(To be used only when requ Board of Directors resolution		<del></del>	file. Must be accompan	nied by a
. It is incorporated under the la	aws of <u>the State</u> c	of Washington		
. The date of its incorporation	isMarch 1, 198	35	and the period of its	duration
is <u>perpetual</u>				
. The address of its principal of	office in the state or cour	ntry under the laws of w	hich it is incorporated is	1
S. 3005 Mt. Vernon	, Spokane, WA	99203		···
. The address to which corresp	pondence should be add	ressed, if different from	that in item 5.	
Same as #5 above				
Coeur d'Alene, Idaho (It is our understand registered agent in Idaho at t	83814 ling that this bus	siness does not h	, and the name of its pave a street addre	ess.)
The purpose or purposes wh				
Cosmetology and ha	• •			
The names and respective ac	ddresses of its directors	and officers are:		
Name	Office		Address	
CONNIE R. NOVELL	PRESIDENT	s. 3005 Mt. V	ernon, Spokane, W	<u>9920</u> 3
R. KERRY NOVELL	SECRETARY	S. 3005 Mt. V	ernon, Spokane, W	A 992 <u>0</u> 3
				<del></del>
	<del></del>			
	_		•	
			(continued	on reverse)

Name	Office	Address
		•
	hall comply with the pr	rovisions of the Constitution and the laws of the State of
Idaho.		
11. This Application is accompani	ied by a certificate of C	Corporate Status or Existence, duly authenticated by the
proper officer of the state	or country under t	he laws of which it is incorporated.
		·
Dated: <u>April 17, 1986</u>		
	GIOVAN	NI'S, INC.
		(Corporation Name)
	By X De	nie B Voull
	Ву — СЕГА	Tts President (Vice President (please specify)
	and 🐰 🖊 😉	of his med
- WACHTNOWN		Its Secretary Assistant Secretary (please specify)
STATE OF WASHINGTON	) ) ss:	
COUNTY OF SPOKANE	) 33.	
	,	
I, GARRY H. GIBSON		, a notary public, do hereby certify that on
this 17th day	of April	, 19_86, personally appeared before
		·
me CONNIE R. NOVELL & R.	KERRY NOVELL	, who being by me first duly sworn, declared that they
	respectivery	GIOVANNI'S, INC.
e the <u>licardent &amp; Secretar</u>	<u>v</u> 01	GIOVAINI S, INC.
<u> </u>		
	** ' 1	- 0
		& Secretary of the corporation and that
the statements therein contained ar	e true.	
		1 21. 1.2.
		Gary W. boken
	•	Notary Public





## STATE of WASHINGTON SECRETARY of STATE

I, Ralph Munro, Secretary of State of the State of Washington and custodian of its seal,

hereby certify that, according to records on file in this office, as of the date of this certificate,

GIOVANNI'S, INC.

is a Washington Profit corporation, duly authorized to transact business or conduct affairs as a corporation in the State of Washington.

Corporation Number: 2-357490-8

Date of Incorporation or Qualification: March 1, 1985

Date: April 23, 1986 Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State