s s	State of Rhode Island and Providence Plantations Office of the Secretary of State			
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Certificate Request F	orm			
Request Information (Entity Name is only required for a Certificate of Non-Existence)				
ID	ENTITY NAME		CERTIFICATE TYPE	
000105314	NORDSTROM, INC.		Good Standing Certificate	
Filer's Contact Information (Enter a contact name, ma				
Contact Name: KAREN				
Business Name:				
No. and Street: <u>1700 - 77</u>				
City or Town: <u>SEATTL</u>		State WA	Zip: <u>98101</u>	Country: USA
Contact Phone: $(206)$ 303	-		Ζιρ. <u>76101</u>	Country. <u>05/1</u>
Contact Email: KAREN.RUBY@NORDSTROM.COM				
Please provide an email address to receive an expedited response from us if the filing is rejected				
for any reason. If no email address is provided, we will respond by mail.				
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