

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000002852

Entity Name: MOM BRANDS COMPANY, LLC

Current Principal Place of Business:

20802 KENSINGTON BLVD
LAKEVILLE, MN 55044

Current Mailing Address:

20802 KENSINGTON BLVD
LAKEVILLE, MN 55044 US

FEI Number: 41-0175310

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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 CEO
Name FRIEDMAN, HOWARD A.
Address 20802 KENSINGTON BLVD
City-State-Zip: LAKEVILLE MN 55044

Title SVP
Name ROSSINI, TIMOTHY P
Address 20802 KENSINGTON BLVD
City-State-Zip: LAKEVILLE MN 55044

Title S
Name BOLLETTIERI, JILL H
Address 20802 KENSINGTON BLVD
City-State-Zip: LAKEVILLE MN 55044

Title ASST. SECRETARY, OTHER, GOVERNORS
Name GRAY, DIEDRE J
Address 2503 S. HANLEY ROAD
City-State-Zip: ST. LOUIS MO 63144

Title OTHER, GOVERNOR
Name VITALE, ROBERT V
Address 2503 S. HANLEY ROAD
City-State-Zip: ST. LOUIS MO 63144

Title OTHER, GOVERNOR
Name ZADOKS, JEFF A
Address 2503 S. HANLEY ROAD
City-State-Zip: ST. LOUIS MO 63144

Title OTHER, CHIEF HR OFFICER
Name BRAKE, TONYA M.
Address 20802 KENSINGTON BLVD
City-State-Zip: LAKEVILLE MN 55044

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: DIEDRE J. GRAY

ASSISTANT SECRETARY 04/07/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date