

**2018 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

**FILED**  
**Apr 02, 2018**  
**Secretary of State**  
**CC5228774343**

**Current Mailing Address:**

2503 S. HANLEY ROAD  
ST. LOUIS, MO 63144 US

**FEI Number: 41-0175310**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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            NEUGENT, CHRISTOPHER J  
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, DIRECTOR  
Name            GRAY, DIEDRE J  
Address        2503 S. HANLEY ROAD  
City-State-Zip: ST. LOUIS MO 63144

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

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

*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    04/02/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date