

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000002007

Entity Name: VOGUE LLC

Current Principal Place of Business:

199 GRANDVIEW
ROAD SKILLMAN, NJ 08558

Current Mailing Address:

199 GRANDVIEW
ROAD SKILLMAN, NJ 08558 US

FEI Number: 59-2881687

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VICE PRESIDENT
Name WEISS, CHRISTOPHER E
Address 800 NICOLLET AVENUE
SUITE 3000
City-State-Zip: MINNESOTA MN 55402

Title ASSISTANT TREASURER
Name DELSORDO, STEPHEN E
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title SECRETARY
Name SENA, JOSEPH
Address 7050 CAMP HILL ROAD
City-State-Zip: FORT WASHINGTON PA 19034

Title ASSISTANT SECRETARY
Name BERENSHTEYN, ALLA
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title TREASURER
Name QUINN, SEAN
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT TREASURER
Name MANN, STEPHANI O
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name ADHOLA, PINTO
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name BORUP, SCOTT P
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

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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: JOSEPH SENA

SECRETARY

04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title ASSISTANT SECRETARY
Name CHAVES, RACHEL
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name DEGEORGE, STEPHANIE K
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name FELDMAN, JAKE D
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name JOSEPH, PIERRE V.
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name LITTLE, DARRYL C
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name PATER, MATTHEW
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name SMILEY, LISA G
Address 2420 SCARLET RD
City-State-Zip: GILROY CA 95020

Title ASSISTANT SECRETARY
Name VINCENT, LEIGH
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title PRESIDENT
Name LOPEZ, DAWN MARIE HAMPTON
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name CRISTALDI, MICHELLE
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name DONNELLY, LAURA A
Address ONE JOHNSON & JOHNSON PLAZA
City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASSISTANT SECRETARY
Name HAYNER, SHARON E
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name KESSEL, AMANDA M
Address 7050 CAMP HILL ROAD
City-State-Zip: FORT WASHINGTON PA 19034

Title ASSISTANT SECRETARY
Name MENDELSON, MELISSA
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name ROTHFUS, JOEL A
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558

Title ASSISTANT SECRETARY
Name VASEN, NADIA
Address 19363 HIGHWAY 19 N
APARTMENT 216
City-State-Zip: CLEARWATER FL 33764

Title MANAGER
Name JOHNSON & JOHNSON CONSUMER I
NC.
Address 199 GRANDVIEW
City-State-Zip: ROAD SKILLMAN NJ 08558