

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000004782

Entity Name: U.S. PET NUTRITION LLC

Current Principal Place of Business:

2150 E. GRAND AVE
EL SEGUNDO, CA 90245

Current Mailing Address:

2150 E. GRAND AVE
EL SEGUNDO, CA 90245 US

FEI Number: 27-2125547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS INTERNATIONAL INC.
801 US HIGHWAY 1
NORTH MIAMI BEACH, FL 33408 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 MGR
Name CHAN, SHUE WING
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title MGR
Name CHENG, NIRUTTINANON
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title SECRETARY, VP OF GENERAL
COUNSEL, LEGAL AND RISK
MANAGEMENT
Name WANG, JENNY
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title MGR
Name CHANSIRI, THIRAPHONG
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title MGR, PRESIDENT
Name WONGPIYA, PICHITCHAI
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title VP IMPORT PRODUCTS
Name TERMLERTMANUSWONG, WIPADA
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

Title VP FINANCE
Name JONES, TIM
Address 2150 E. GRAND AVE
City-State-Zip: EL SEGUNDO CA 90245

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: PICHITCHAI WONGPIYA

MANAGER, BY KAYLA 04/12/2022
BLACKWELL, ATTORNEY-
IN-FACT

Electronic Signature of Signing Authorized Person(s) Detail

Date