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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOMINIQUE JONES

Electronic Signature of Signing Officer/Director Detail

FEI Number: NOT APPLICABLE

JONES, DOMINIQUE 233 NW 12TH STREET #2 POMPANO BEACH, FL 33060 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:

Officer/Director Detail : Title Ρ Title т JONES, DOMINIQUE JONES, JANINE Name Name

Certificate of Status Desired: No

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N2100009360

Entity Name: LASSIE MOMS & EVENTS INC

Current Principal Place of Business:

233 NW 12TH STREET #2 POMPANO BEACH. FL 33060

Current Mailing Address:

233 NW 12TH STREET #2 POMPANO BEACH. FL 33060 US

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

04/02/2022

FILED Apr 02, 2022 Secretary of State 3665386636CC

Date

Date