





STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION CORPORATION

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448

For Office Use Only

-FILED-

File No.: BA20241909599 Date Filed: 10/28/2024

| Entity Details | | |
|--|------------------|--|
| Corporation Name | The Thriving Mom | |
| Entity No. | 6438674 | |
| Formed In | CALIFORNIA | |
| Street Address of Principal Office of Corporation | | |
| Principal Address | 3571 LEGATO CT | |
| | POMONA, CA 91766 | |
| Mailing Address of Corporation | | |
| Mailing Address | 3571 LEGATO CT | |
| | POMONA, CA 91766 | |
| Attention | Emmy Kolb | |
| Street Address of California Office of Corporation | | |
| Street Address of California Office | 3571 LEGATO CT | |
| | POMONA, CA 91766 | |

Officers

| Officer Name | Officer Address | Position(s) |
|---------------|------------------------------------|---|
| + Emmy Y Kolb | 3571 LEGATO CT POMONA, CA 91766 | Chief Financial Officer, Secretary, Chief Executive Officer |

Additional Officers

| Officer Name | Officer Address | Position | Stated Position |
|--------------|-----------------|----------|-----------------|
| None Entered | | | |

Directors

| Director Name | Director Address |
|---------------|------------------------------------|
| Emmy Y Kolb | 3571 LEGATO CT POMONA, CA 91766 |

The number of vacancies on Board of Directors is: 0

Agent for Service of Process

Agent Name **Emmy Yanet Kolb** Agent Address 3571 LEGATO CT POMONA, CA 91766

Type of Business

Type of Business Podcast of stories and expert advice to elevate your journey in life and business

Email Notifications

Opt-in Email Notifications Yes, I opt-in to receive entity notifications via email.

Labor Judgment

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

| Electronic Signature | | | | |
|--|------------|--|--|--|
| By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign. | | | | |
| | | | | |
| Emmy Y Kolb | 10/28/2024 | | | |
| Signature | Date | | | |
| | | | | |