

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000002257

**Entity Name:** COTON COLORS COMPANY LLC**Current Principal Place of Business:**2718 CENTERVILLE ROAD  
TALLAHASSEE, FL 32308**Current Mailing Address:**2718 CENTERVILLE ROAD  
TALLAHASSEE, FL 32308 US**FEI Number:** 20-8175156**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MUNROE, COURTNEY P  
2718 CENTERVILLE ROAD  
TALLAHASSEE, FL 32308 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:** COURTNEY MUNROE

01/04/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            JOHNSON, LAURA L  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            VP  
Name            PLOEBST, MARCIE E  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            TREASURER, SECRETARY  
Name            BLANK, JOHN L  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            VP - OPERATIONS  
Name            TRAFTON, ASHLEY W  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            CREATIVE DIRECTOR  
Name            SMITH, KYLE E  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            FINANCE DIRECTOR  
Name            MUNROE, COURTNEY  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            PRODUCT DIRECTOR  
Name            PERKINS, BRITTANY  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title            SALES DIRECTOR  
Name            AMY, RACHEL  
Address        2718 CENTERVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32308

*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:** ASHLEY TRAFTON

VP OPERATIONS

01/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date