

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000203730

**Entity Name:** COLORUS, LLC

**Current Principal Place of Business:**

540 BRICKELL KEY DRIVE  
APT. 1103  
MIAMI, FL 33131

**Current Mailing Address:**

540 BRICKELL KEY DRIVE  
APT. 1103  
MIAMI, FL 33131 US

**FEI Number:** 36-5054212

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANNA, FATEEVA A  
540 BRICKELL KEY DRIVE  
APT. 1103  
MIAMI, FL 33131 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            PRES  
Name            PINZON ARDILA, ALBERTO  
Address        540 BRICKELL KEY DRIVE, APT. 1103  
City-State-Zip: MIAMI FL 33131

Title            VP, MANAGER  
Name            FATEEVA, ANNA A  
Address        540 BRICKELL KEY DRIVE  
                  APT. 1103  
City-State-Zip: MIAMI FL 33131

*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:** FATEEVA, ANNA A

**VP, MANAGER**

**02/05/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date