h20000310872

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(==, =====,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

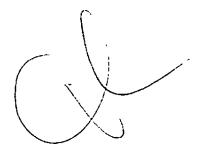




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FILED
2022 OCT 31 AM II: 44



COVER LETTER

Colour Rush LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000310872 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

liability company.

Registration Section

*Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the unders	igned,	
United States Corp	poration Agents, Inc.	hereby resigns as	
	Name of Registered Agent	icreby resigna ds	
Registered Agent for	Colour Rush LLC		
	Name of Limited Liability Company	·	
L20000310872			
Document N	lumber, if known		
A copy of this resignat	ion was mailed to the above listed limited liability co	ompany at its last known address.	
The agency is terminat	ed and the office discontinued on the 31st day after t	~ 3	3
If signing on behalf of an entity:		MEZ OCT 31	-
	Cheyenne Moseley	SSS Z	9
	Typed or Printed Name	of SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	J
	Asst. Secretary for United States Corporation Ager	nts. Inc.	
	Capacity		

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314