

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000105867

**Entity Name:** LATIN KIMYA US LLC

**Current Principal Place of Business:**

2020 PONCE DE LEON BLVD  
SUITE 904  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2020 PONCE DE LEON BLVD  
SUITE 904  
CORAL GABLES, FL 33134 US

**FEI Number:** 88-1641184

**Certificate of Status Desired:** No

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

AVALON INCORPORATORS LLC  
2020 PONCE DE LEON BLVD  
SUITE 904  
CORAL GABLES, FL 33134 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 MGR  
Name PEREZ LONDONO, MARLON  
Address CLL 9B SUR 79A 101 APTO 616 BR  
City-State-Zip: MEDELLIN AN 000

Title MGR  
Name DUQUE CADAVID, ESTEFANY  
Address CRA 27A # 27 E SUR- 51 APTO 805  
URB ST LAU  
City-State-Zip: ENVIGADO AN 000

*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:** PEREZ LONDONO , MARLON

MGR

05/24/2023

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

\_\_\_\_\_  
Date