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

Office Use Only



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To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 04/24/25 Order #: 1949209-1

Re: Color Confidential Palm Beach LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation
Amount to be deducted from our State Account: \$125.0 - FL State Account Number: I2000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF ORGANIZATION FOR FLOR	IDA LIMITED LIABILITY COMPANY
ARTIĆLE I - Name:	
The name of the Limited Liability Company is:	
Color Confidential Palm Beach LLC	
(Must conatin the words "Limited Liabil	ty Company, "L.L.C.," or "LLC.")
The mailing address and street address of the principal office of the principal office Address:	Mailing Address:
2 East 61st St. & 5th Avenue	2 East 61st St. & 5th Avenue
New York, NY 10065	New York, NY 10065
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Regis	
another business entity with an active Florida registration.)	noted Agont. Tell mass designate an mary total of

The name and the Florida street address of the registered agent are:

 Corporation Service Company

 Name
 1201 Hays Street

 Florida street address (P.O. Box NOT acceptable)

 Tallahassee
 FL
 32301

 City
 State
 Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my indies, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Corporation Service Company

By\_\_Shauna Godbolt\_

(CONTINUED)

ARTICLE IV-

. . . . . .

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	ber
AMBR	Reyad Fritas
	315 E. Dean St. Aspen, CO 81611
	Aspen, CO storr
AMBR	Kylie Williard-Fritas
	380 Lenox Ave, Apt B New York, NY 10027
	New 1018, 191 10027
(Use attachment if necessary)	•
the date of filing.)  Note: If the date inserted in this block the document's effective date on the E	·
ARTICLE VI: Other provisions, if any	
This docume I am aware ti	with the first of an authorized representative of a member. ent is executed in accordance with section 605.0203 (1) (b), Florida Statutes, nat any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.
	Reyad Fritas
	Typed or printed name of signee
	Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FIN-384864