

**M14 000005195**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

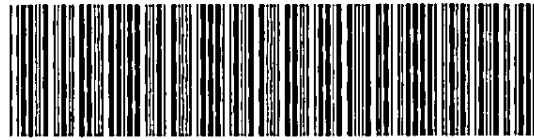
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**200357860762**

01/22/21--01010--026 \*\*30.00

**MAR 05 2021**  
**S. YOUNG**

2021 JAN 22 PM 6:29

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: So White Design & Illustration, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca White  
Name of Person

Rebecca White Design  
Firm/Company

6815 Biscayne Blvd Ste 103 #319  
Address

Miami, FL 33138  
City/State and Zip Code

design@rebeccawhite.co  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca White at (901) 496-1035  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input checked="" type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|--|--|--|

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: So White Design & Illustration

Enter new principal office address, if applicable:

*(Principal office address  
MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable:

*(Mailing address  
MAY BE A POST OFFICE BOX)*

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2. The Florida document number of this limited liability company is:

SW M14000005195  
~~M14000005195~~

3. Jurisdiction of its organization: Mississippi

4. Date authorized to do business in Florida: July 2014

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Rebecca White Design, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida Street Address*

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

\_\_\_\_\_  
*Rebecca White*  
Signature of the authorized representative

\_\_\_\_\_  
*Rebecca White*  
Typed or printed name of signee

**Filing Fee: \$25.00**



**Michael Watson**  
SECRETARY OF STATE

Office of the Secretary of State  
Jackson, Mississippi

Rebecca White Design, LLC

Business ID: 989523

The attached 3 pages are true and correct copies of documents filed in the Mississippi Secretary of State's Office pursuant to the Mississippi Code of 1972 Annotated.

This the 19th day of January, 2021.

Given under my hand and seal of office  
the 19th day of January, 2021

A handwritten signature in black ink, appearing to be "JL", with a horizontal line extending to the right.

Jeffrey L. Lee, Assistant Secretary of State

Certificate Number: CN21101067

Verify this certificate online at <http://corp.sos.ms.gov/corpconv/verifycertificate.aspx>

**F0108**  
**Fee: \$**



**Michael Watson**  
SECRETARY OF STATE

**2020164970**

Business ID: 989523  
Filed: 04/14/2020 09:41 AM  
Michael Watson  
Secretary of State

**2020 LLC Annual Report**

**Business Information**

**Business ID:** 989523

**Business Name:** Rebecca White Design, LLC

**State of Incorporation:** MS

**Business Email:** design@rebeccawhite.co

**Phone:** (\*\*\*)\*\*\*-\*\*\*\*

**FEIN:** \*\*-\*\*\*\*\*

**Principal Address:** 6815 Biscayne Blvd, #319  
Miami, FL 33138

**Registered Agent**

**Name:** White, Rebecca

**Address:** 1060 E. County Line Rd., Ste 3A-222  
Ridgeland, MS 39157

**Managers and Members**

**Members**

**Name:**

Rebecca White  
Member

**Address:**

1060 E County Line Rd., Ste 3A-222  
Ridgeland, MS 39157

**Officers**

**Title/Name:**

**Address:**

**Director:**

**President:**

☐

**Vice President:**

☐

**Secretary:**

☐

**Treasurer:**

☐

☐ This LLC has a written Operating Agreement.  
P.O. BOX 136  
JACKSON, MS 39205-0136

TELEPHONE: (601) 359-1633

**NAICS Code/Nature of Business**

541430 - Graphic Design Services

**Signature**

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day ***04/14/2020***.

***Name:***

Rebecca White

*Other*

***Address:***

6815 Biscayne Blvd, #319

Miami, FL 33138

## **Officers List**

***Name:***

Rebecca White

*Member*

***Address:***

1060 E County Line Rd., Ste 3A-222  
Ridgeland, MS 39157





**Michael Watson**  
SECRETARY OF STATE

Office of the Secretary of State  
Jackson, Mississippi

Rebecca White Design, LLC

Business ID: 989523

The attached 1 pages are true and correct copies of documents filed in the Mississippi Secretary of State's Office pursuant to the Mississippi Code of 1972 Annotated.

This the 19th day of January, 2021.

2021 JAN 22 PM 6:29

Given under my hand and seal of office  
the 19th day of January, 2021

A handwritten signature in black ink, appearing to be "JL", written over a horizontal line.

Jeffrey L. Lee, Assistant Secretary of State

Certificate Number: CN21101067

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>

**F0012**

**2019290499**

**Fee: \$ 50**



**DELBERT HOSEMANN**  
*Secretary of State*

Business ID: 989523  
Filed: 10/25/2019 01:21 PM  
C. Delbert Hosemann, Jr.  
Secretary of State

P.O. BOX 136  
JACKSON, MS 39205-0136

TELEPHONE: (601) 359-1633

**Articles/Certificate of Amendment**

**Business Details**

***Business ID:*** 989523

***Business Name:*** So White Design and Illustration, LLC

**Current Business Name**

***Business Name:*** So White Design and Illustration, LLC

**Amended Business Name**

***Business Name:*** Rebecca White Design, LLC

**Signature**

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day **10/25/2019**.

***Name:***

Rebecca White  
*Member*

***Address:***

1060 E County Line Rd. Ste 3A-222  
Ridgeland, MS 39157

2021 JAN 22 PM 6:29