

M24 000000393

(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:

W24000002702

Office Use Only



600419873916

12/05/25--31025--014 \*\*155, 15

2024 JAN 16 AM 9:40

FILED  
JAN 16  
AM 9:40



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2024

EDWIN PRADO  
111 NORTH ORANGE AVE SUITE 800 UNIT 849  
ORLANDO, FL 32801 US

SUBJECT: WHITE ENTERTAINMENT LLC  
Ref. Number: W24000002702

We have received your document for WHITE ENTERTAINMENT LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Corey Pettway  
Regulatory Specialist II

Letter Number: 724A00000499

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: White Entertainment LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Edwin Prado

\_\_\_\_\_  
Name of Person

Prado Law Office LLC

\_\_\_\_\_  
Firm/Company

111 North Orange Ave Suite 800 unit 849

\_\_\_\_\_  
Address

Orlando, FL 32801

\_\_\_\_\_  
City/State and Zip Code

whiteentertainmentpr@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edwin Prado

407

420-7926

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact 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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

**AFFIDAVIT RELEASING THE NAME OF WHITE ENTERTAINMENT CORP**

Reference to DOCUMENT NUMBER: P23000073171

I am the owner of the now dissolved corporation White Entertainment Corp. I have no intention of revoking the dissolved corporation. I am releasing the name so it could be used for this filing.

Cordially,

*Nicholas R*

Nicholas Rodriguez

State of Florida

County of Broward



MICHAEL DE PENA  
Notary Public - State of Florida  
Commission # MH 308451  
Expires on September 5, 2028

This foregoing instrument was acknowledged before me by means of online notarization on this 01/15/2024 by Nicholas Rodriguez.

*Michael De Pena*  
Michael De Pena

\_\_\_ Personally Known OR ☒ Produced Identification

Type of Identification Produced DRIVER LICENSE

Notarized online using audio-video communication

2024 JAN 16 AM 9:40  
FILED  
NOTARY  
PUBLIC  
STATE OF FLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. White Entertainment LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Puerto Rico 3. 66-1055537  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 403 calle del parque piso 8 6. 403 calle del parque piso 8  
(Street Address of Principal Office) (Mailing Address)
- San Juan, Puerto Rico 00912 San Juan, Puerto Rico 00912

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Nicholas Rodriguez

Office Address: 1250 Park Square Circle Unit 4, APT 109

Kissimmee, Florida 34744  
(City) (Zip code)

2024 JAN 16 AM 9:40

APPROVED  
FILED

Registered agent's acceptance:

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 application, 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.

Nicholas B

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:**                      **Name and Address:**

☐ Manager      Name: Nicholas Rodriguez

☒ Member      Address: 1250 Park Square Circle

☐ Authorized      Unit 4, Apt 109, Kissimmee, FL 34744

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

**Title or Capacity:**                      **Name and Address:**

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person      \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

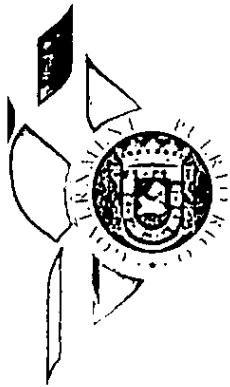
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



\_\_\_\_\_  
Signature of an authorized person

Nicholas Rodriguez



## CERTIFICATE OF GOOD STANDING

I, **Omar J. Marrero Diaz**, **Secretary of State** of the Government of Puerto Rico.

**CERTIFY:** That, pursuant to Puerto Rico's General Law of Corporations, **WHITE ENTERTAINMENT LLC**, register number **516699**, a **for profit domestic** Limited Liability Company organized under the laws of Puerto Rico on **September 26, 2023**, is in good standing until **April 15, 2024**, date on which its first Annual Fee is due.



**IN WITNESS WHEREOF**, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, **September 26, 2023**.

**Omar J. Marrero Diaz**  
Secretary of State

To validate this certificate go to:

<https://estado.pr.gov/>

This certificate is valid for one (1) year from issue date (Regulation 8688, Art. 26). However, it is subject to faithful compliance with the provisions of Chapter XV and Chapter XXI of Act 164-2009, as applicable.

Certificate Validation Number: **595622-52770522**