

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000021684

**Entity Name:** JADE WHITE, LLC

**Current Principal Place of Business:**

3015 INGLESIDE DR  
APT H  
HIGH POINT, NC 27265

**Current Mailing Address:**

3015 INGLESIDE DR  
APT H  
HIGH POINT, NC 27265 US

**FEI Number:** 92-1887938

**Certificate of Status Desired:** No

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

WHITE, JADE  
4320 SUNBEAM RD  
APT 616  
JACKSONVILLE, FL 32257 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            OWNER  
Name            WHITE, JADE  
Address        3015 INGLESIDE DR  
                  APT H  
City-State-Zip: HIGH POINT NC 27265

*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:** JADE WHITE

**OWNER**

**02/06/2025**

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

\_\_\_\_\_  
Date