

LC6 000 120 422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

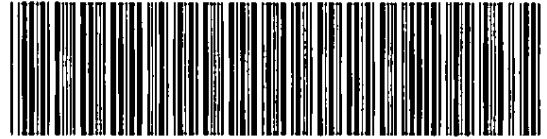
Special Instructions to Filing Officer:

J. HORNE

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2022 AUG -1 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 AUG -1 AM 11:59

SR
TALLAHASSEE

July 19, 2022

BENJAMIN C.P. SAPP
125 S. JEFFRIES BLVD
WALTERBORO, SC 29488 US

SUBJECT: WILLIAMS FARMS LLC
Ref. Number: L06000120422

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 822A00016102

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Williams Farms, LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Benjamin C. P. Sapp
(Contact Person)

Sapp Law Firm
(Firm/Company)

125 S. Jefferson Blvd. P.O. Box 258
(Address)

Walterboro, South Carolina 29488
(City/State and Zip Code)

For further information concerning this matter, please call:

Benjamin C. P. Sapp at (843) 549-5923
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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



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2022 AUG 21 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Williams Farms, LLC

2. The Florida document/registration number assigned to this limited liability company is:

LO6000120422

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/21

4. I, James W. Williams, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEMBER
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]

Signature of Dissociating Member or Resigning Manager

Mark W. Adams as Attorney in fact
for James W. Williams

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)