

M08000002087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

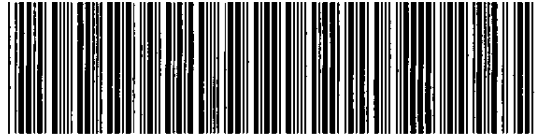
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500146745485

03/25/09--01021--020 **25.00

FILED
09 MAR 25 AM 11:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Williamson Cattle Ranch Operations, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer L. Williamson

(Name of Person)

Crary-Buchanan

(Firm/Company)

555 Colorado Ave.

(Address)

Stuart, FL 34994

(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer L. Williamson at (772) 287-2600

(Name of Person)

(Area Code and Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

FILED

09 MAR 25 AM 11:01

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Williamson Cattle Ranch Operations, LLC
2. This entity was formed under the laws of: Texas
3. This entity was authorized to transact business in Florida on 05/02/2008
and its Florida document/registration number is M08000002087
4. The name and address of each manager or managing member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Faye A. Haverlock, Trustee

P.O. Box 759

Okeechobee, FL 34973

Required Signature: _____

(Signature of Manager, Managing Member or Member)

Filing Fee: \$25