

M1000000 2884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

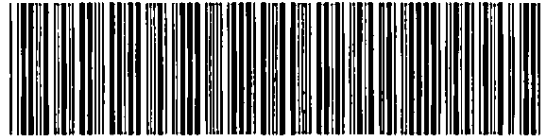
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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05/29/18--01014--018 \*\*25.00

05/29/18 11:23

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 30, 2018

APRIL FUNK  
818 N MCKENZIE ST  
FOLEY, AL 36535

SUBJECT: WOERNER AGRIBUSINESS, LLC  
Ref. Number: M10000002884

We have received your document for WOERNER AGRIBUSINESS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not 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.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 918A00011194

RECEIVED  
2018 JUN 14 AM 10:55  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WOERNER AGRIBUSINESS, 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:

April Funk  
Name of Person

Woerner Agribusiness, LLC  
Firm/Company

818 N. McKenzie Street  
Address

Foley, AL 36535  
City/State and Zip Code

Mbruhn@woernerurf.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Bruhn at ( 251 ) 943-4453  
Name of Person Area Code & 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 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & 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: WOERNER AGRIBUSINESS, LLC

Enter new principal office address, if applicable: NOT applicable

*(Principal office address*

**MUST BE A STREET ADDRESS**

Enter new mailing address, if applicable: not applicable

*(Mailing address*

**MAY BE A POST OFFICE BOX**

2. The Florida document number of this limited liability company is: M10000002884

3. Jurisdiction of its organization: Alabama (Baldwin County)

4. Date authorized to do business in Florida: 06/25/2010

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

5. New name of the limited liability company: \_\_\_\_\_  
(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:

George Werner removed as Managing member, Donna Fikes removed as CFO Allen Werner removed  
(Only manager is Roger L. Werner as of 5/1/18)  
Title/Capacity      Name      Address      Type of Action

MGR      George Werner      \_\_\_\_\_      ☐ Add

818 N. McKenzie St. Foley, AL 36533 ☒ Remove

CFO      Donna Fikes      \_\_\_\_\_      ☐ Add

818 N. McKenzie St. Foley, AL 36533 ☒ Remove

MGR      Allen Werner      \_\_\_\_\_      ☐ Add

818 N. McKenzie St. Foley, AL 36533 ☒ Remove

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      ☐ Add

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      ☐ Remove

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      ☐ Add

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      ☐ 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.

April W Funk  
Signature of the authorized representative

April W Funk, Secretary  
Typed or printed name of signer

Filing Fee: \$25.00

John H. Merrill  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Woerner AgriBusiness, LLC was formed in Baldwin County, Alabama on November 25, 2009. The Alabama Entity Identification number for this entity is 440-727. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20180611000016438

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

06/11/2018

Date

A handwritten signature in black ink, reading "J. H. Merrill".

John H. Merrill

Secretary of State