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Division of Corporations

Florida Department of State  
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To:

Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: cheryl.mahon@williams.com

**Foreign Limited Liability Company  
Williams Field Services Company, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

MAY 28 2024

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:

Williams Field Services Company, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC."

2. DE 73-1591878  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. May 20, 2024  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. One Williams Center  
(Street Address of Principal Office)  
Tulsa, Oklahoma 74172

6. One Williams Center  
(Mailing Address)  
Tulsa, Oklahoma 74172

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

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.

C T Corporation System  
By: Sherry McGinnis Sherry McGinnis- Assistant Secretary  
(Registered agent's signature)

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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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Alan S. Armstrong</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Larry C. Larsen</u>
<input type="checkbox"/> Member	Address: <u>One Williams Center</u>	<input type="checkbox"/> Member	Address: <u>One Williams Center</u>
<input type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>	<input type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>
Person	_____	Person	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Other	_____
<input type="checkbox"/> Manager	Name: <u>Micheal G. Dunn</u>	<input type="checkbox"/> Manager	Name: <u>Cheryl L. Mahon</u>
<input type="checkbox"/> Member	Address: <u>One Williams Center</u>	<input type="checkbox"/> Member	Address: <u>One Williams Center</u>
<input checked="" type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>	<input checked="" type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>
Person	_____	Person	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Other	_____
<input type="checkbox"/> Manager	Name: <u>Robin F. Shilt</u>	<input type="checkbox"/> Manager	Name: <u>Robert E. Riley, Jr.</u>
<input type="checkbox"/> Member	Address: <u>One Williams Center</u>	<input type="checkbox"/> Member	Address: <u>One Williams Center</u>
<input checked="" type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>	<input checked="" type="checkbox"/> Authorized	<u>Tulsa, OK 74172</u>
Person	_____	Person	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> 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.

Cheryl L. Mahon  
 Signature of an authorized person

Cheryl L. Mahon, Assistant Secretary

Typed or printed name of signer

## Positions by Entity

As of May 20, 2024

### Williams Field Services Company, LLC

#### Officers

	<u>Title</u>	<u>Address</u>
Chad J. Zamarin	Authorized Person	One Williams Center, Tulsa, OK 74172
Danilo M. Juvane	Authorized Person	One Williams Center, Tulsa, OK 74172
Larry C. Larsen	Authorized Person	One Williams Center, Tulsa, OK 74172
Eric J. Ormond	Authorized Person	One Williams Center, Tulsa, OK 74172
Chad A. Teply	Authorized Person	One Williams Center, Tulsa, OK 74172
T. Lane Wilson	Authorized Person	One Williams Center, Tulsa, OK 74172
Camilo X. Amezcua	Authorized Person	One Williams Center, Tulsa, OK 74172
Robert T. Biffle	Authorized Person	One Williams Center, Tulsa, OK 74172
Peter S. Burgess	Authorized Person	One Williams Center, Tulsa, OK 74172
Mark J. Cizek	Authorized Person	One Williams Center, Tulsa, OK 74172
Mary Frances Edmonds	Authorized Person	One Williams Center, Tulsa, OK 74172
Payvand Fazel	Authorized Person	One Williams Center, Tulsa, OK 74172
Stephen J. Furbacher	Authorized Person	One Williams Center, Tulsa, OK 74172
Mark A. Gebbla	Authorized Person	One Williams Center, Tulsa, OK 74172
David A. Glenn	Authorized Person	One Williams Center, Tulsa, OK 74172
Stephen A. Halridge	Authorized Person	One Williams Center, Tulsa, OK 74172
Laura C. Hill	Authorized Person	One Williams Center, Tulsa, OK 74172
Glen G. Jasek	Authorized Person	One Williams Center, Tulsa, OK 74172
Glenn E. Koch	Authorized Person	One Williams Center, Tulsa, OK 74172
Melissa A. McGillen	Authorized Person	One Williams Center, Tulsa, OK 74172
Todd J. Rinke	Authorized Person	One Williams Center, Tulsa, OK 74172
Jason N. Sarakatsannis	Authorized Person	One Williams Center, Tulsa, OK 74172
Amy E. Shank	Authorized Person	One Williams Center, Tulsa, OK 74172
Cory E. Taylor	Authorized Person	One Williams Center, Tulsa, OK 74172
Amanda L. Thrash	Authorized Person	One Williams Center, Tulsa, OK 74172
Steven G. Tramonte	Authorized Person	One Williams Center, Tulsa, OK 74172
John F. Walsh	Authorized Person	One Williams Center, Tulsa, OK 74172
Geoffrey Wilkinson	Authorized Person	One Williams Center, Tulsa, OK 74172

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TALLAHASSEE, FLORIDA

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "WILLIAMS FIELD SERVICES COMPANY, LLC"  
IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN  
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF  
THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN  
PAID TO DATE.

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A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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