FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	d Address of Re <u>Ferry Verno</u>		2. Date of Event Requiring Statement (Month/Day/Year) 10/19/2021 3. Issuer Name and Ticker or Trading Symbol Worldwide Webb Acquisition Corp. [WWAC]							
(Last) 770 E TEC (Street) OREM (City)	(First) CHNOLOGY UT (State)	(Middle) WAY F13-16 84097 (Zip)	-		Issuer (Check all applicable) X Director X Officer (give title below)	ieck all applicable) X Director 10% Owner V Officer (give Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
		Та	ble I - Non	-Derivati	ve Securities Be	neficially (Owned	*		
1. Title of Security (Instr. 4)					2. Amount of Securiti Beneficially Owned (I 4)	nstr. Form			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Security (Instr. 4)		ity Convers		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.
 		Date	Expiration		Amour or Number of	Security		Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Terry Vernon Pearce 10/19/2021

** Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.