

LD7000115487

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(City/State/Zip/Phone #)

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2009 JUL -8 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUN 19 2009

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** WEST INDIES GLOBAL SERVICES

**DOCUMENT NUMBER:** L07000115487

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEMUEL MICHEL

Name of Contact Person

WEST INDIES GLOBAL SERVICES, LLC

Firm/ Company

13136 NW 7TH AVENUE

Address

MIAMI, FL 33168

City/ State and Zip Code

macksonkeny@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEMUEL MICHEL

Name of Contact Person

at ( 305 )

763-7609

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2009

KEMUEL MICHEL  
WEST INDIES GLOBAL SERVICES, LLC  
13136 NW 7TH AVE.  
MIAMI, FL 33168

SUBJECT: WEST INDIES GLOBAL SERVICES , LLC  
Ref. Number: L07000115487

We have received your document for WEST INDIES GLOBAL SERVICES , LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 009A00020937

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2009 JUL -8 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WEST INDIES GLOBAL SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11-15-2007 and assigned  
Florida document number L07000115487.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office 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:

KEMUEL MICHEL

New Registered Office Address:

410 NE 160 TERRACE

*Enter Florida street address*

MIAMI

, Florida

33162

*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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

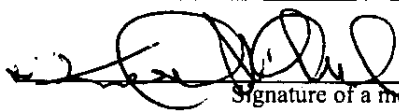
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	ERNICE JOSEPH	13136 NW 7TH AVENUE MIAMI, FL 33168	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	KEMUEL MICHEL	410 NE 160 TERRACE MIAMI, FL 33162	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated JULY 01, 2009



Signature of a member or authorized representative of a member

KEMUEL MICHEL

Typed or printed name of signee

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TALLAHASSEE, FLORIDA