

L12000044905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

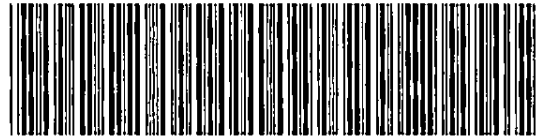
(Business Entity Name)

(Document Number)

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

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02/21/19--01006--024 \*\*25.00

APPROVED  
AND  
FILED  
2019 FEB 21 AM 12:41  
SECRETARY OF STATE  
TALLAHASSEE, FL 09000

T.G.  
02/26/19

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TRADE LINK WESTINDIES, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SCOTTPFEIFFER

\_\_\_\_\_  
Name of Person

TRADE LINKS WESTINDIES, LLC

\_\_\_\_\_  
Firm/Company

4386 PINE TREE DRIVE

\_\_\_\_\_  
Address

MIAMI BEACH, FL 33140

\_\_\_\_\_  
City/State and Zip Code

controller@tradelinkwi.com

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

For further information concerning this matter, please call:

SCOTTPFEIFFER

305 450.1890  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

## TRADE LINK WEST INDIES, LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RAIZY FELLIG	4386 PINE TREE DRIVE, MIAMI BEACH, FL 33140	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ISRAEL FELLIG	4386 PINE TREE DRIVE, MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE  
FALLAHUSSEIN, FLORNO

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AND  
FILED


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2019 FEB 21 AM 12:41

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 1/31/19

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Raizy Fellego  
\_\_\_\_\_  
Typed or printed name of signer