M11000005619

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Consideration to Siling Officers			
Special Instructions to Filing Officer:			
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B. KOHR

NOV - 8 2011

EXAMINER



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ACCOUNT NO. : I2000000195 .

REFERENCE : 971242 7269114

AUTHORIZATION

COST LIMIT

ORDER DATE: November 7, 2011

ORDER TIME : 10:09 AM

ORDER NO. : 971242-015

CUSTOMER NO: 7269114

FOREIGN FILINGS

NAME: WEST LANGUAGE SERVICES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations	,		
SUBJEC	T: West Language Services, LLC			
		ame of Limited Liability Company		
		ability Company for Authorization to Transact Business in Florida," C above referenced foreign limited liability company to transact busines		
Please ret	urn all correspondence concerning this n	natter to the following:		
		Name of Person		
	Corporation Service Company Firm/Company 2711 Centerville Rd., Suite 400 Address			
	Wilmington, DE 19808			
		City/State and Zip Code		
7	E-mail address:	(to be used for future annual report notification)		
For further	r information concerning this matter, ple	ease call:		
C	Chris Shrader, CP	at (800) 542-1000		
	Name of Person	Area Code & Daytime Telephone Number		
. I	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclose	d is a check for the following amo \$125.00 Filing Fee \$\bigci{2}\$\$\$\$ S130.00 Filing States of States of States and States are the filler of States	Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. West Language Services, LLC	
(Name of Foreign Limited Liability Company; must include "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 w	ritte
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability	
Company," "L.L.C," "LLC.")	
2. Delaware 3.	(m) >
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	- A. (
(Jurisdiction under the law of which foreign limited liability company is organized) 4. 10/6/2011 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "nemetual")	سند. من
4. 10/6/2011 5. Perpetual	ć
(Date of Organization) (Duration: Year limited liability company will cease to	,
exist or "perpetual")	
6. N/A	<u> </u>
(Date first transacted business in Florida, if prior to registration.)	P. 元
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	9
7 11808 Miracle Hills Drive Omaha, NE 68154	-
(Street Address of Principal Office)	
9. If the ited liebility common is a manager managed common check home.	
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	
7. The hame and usual business addresses of the managing members of managers are as follows.	
West Corporation	
11808 Miracle Hills Drive	
0. 1. 377 (0.154	
Omaha, NE 68154	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recor	rls in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	W 11
translation of the certificate under oath of the translator must be submitted.)	
ŕ	
11. Nature of business or purposes to be conducted or promoted in Florida: Interpretation and document	
translation services	
and // lusson	
Signature of a member or an authorized representative of a member.	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the	
penalties of perjury that the facts stated herein are true. 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.)	
David C. Mussman	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. Ine nan	ne of the Limited Liability Cor	npany is:
West Lang	guage Services, LLC	. د
If unavailal	ble, the alternate to be used in	the state of Florida is:
2. The nan	ne and the Florida street addres	s of the registered agent and office are:
	Corporation Service Com	pany
		(Name)
	1201 Hays Street	
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)
	Tallahassee	FL 32301
		· City/State/Zip
liability con agent and a relating to t	npany at the place designated in tgree to act in this capacity. I fu he proper and complete perforn	d to accept service of process for the above stated limited this certificate, I hereby accept the appointment as registered rther agree to comply with the provisions of all statutes nance of my duties, and I am familiar with and accept the ent as provided for in Chapter 608, Florida Statutes.
	By: \$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agent Certified Copy (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WEST LANGUAGE SERVICES, 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 EIGHTH DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WEST LANGUAGE SERVICES, LLC" WAS FORMED ON THE SIXTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

5048550 8300

111175399

AUTHENTY CATION: 9142197

DATE: 11-08-11

You may verify this certificate online at corp.delaware.gov/authver.shtml