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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LEGAL SERVICING PAR	RTNERS LLC
Name of Limited Liability Co	ompany
Dear Sir or Madam:	
The enclosed Articles of Correction and fee(s) are submitted for filing	, .
Please return all correspondence concerning this matter to the following	ng:
ANDREW PRIMAVERA	_
Name of Person	
AVERA SYSTEMS USA INC.	_
Firm/Company	7.0
199 E FLAGLER ST STE 1460	MH DEC 22
Address	EC 22 LTARY NASSI
MIAMI FL 33131	
City/State and Zip Code	Y OF STATE
MR.PRIMAVERA1@GMAIL.COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
ANDREW PRIMAVERA at (786	_)6930231
Name of Person Area Co	ode & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$30 Filing Fee \$ Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: LEGAL SERVICING PARTNERS LLC.				
<u>SECO</u>	ND: The articles of organization or the application to transact business				
(CH	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE S	<u> </u>	<u>IENT</u>		
\checkmark	ntains an incorrect statement. The incorrect statement, the reason the statement is orrect, and the corrected statement are as follows:				
		5	201		
	AVERA SYSTEMS USA IN NOT A LLC IT IS A INC.		F .		
	PLEASE CHANGE AVERA SYSTEMS USA LLC. TO	ASSI	22		
	AVERA SYSTEMS USA INC.	E, FL	*		
	<u>OR</u>	ORIBA	<u>8</u>		
	Was defectively signed. The manner in which the document was defective the appropriate correction are as follows:	ly signe	d and		
Dated:					
	Low L.				
	Signature of a member or authorized representative of a member				
	ANDREW PRWMVGRA				
	Typed or printed name of signee				
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				