

5/29/2014

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

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To:

Division of Corporations  
 Fax Number : (850) 617-6383

From:

Account Name : SILVAS FINANCIAL SERVICES, LLC  
 Account Number : I20020000100  
 Phone : (305) 944-9755  
 Fax Number : (888) 401-1914

FILED  
 14 MAY 29 PM 6:15  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** ACCOUNTING3@SILVASFINANCIALSERVICES.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**LATIN AMERICA PARTS & TRADING, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

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T. Buren MAY 29 2014

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LATIN AMERICA PARTS & TRADING, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**MARTIN REYES**

Name of Person

**SILVAS FINANCIAL SERVICES, LLC**

Firm/Company

**5220 S. UNIVERISTY DR. STE C-102**

Address

**DAVIE, FL 33328**

City/State and Zip Code

**accounting3@silvasfinancialservices.com**

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

For further information concerning this matter, please call:

**MARTIN REYES**

**305**

**944-9755**

at ( )

Name of Person

Area Code

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

☒ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2E062 (2/14)

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**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: LATIN AMERICA PARTS & TRADING, I  
LATIN AMERICA PARTS & TRADING, LLC

**SECOND:** The Florida Document number of the limited liability company is: L14000083930

**THIRD:** Document to be corrected is:  
NAME OF LIMITED LIABILITY COMPANY

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

THE CORRECT NAME OF THE LIMITED LIABILITY COMPANY ITS AS  
FOLLOW LATIN AMERICAN PARTS & TRADING, LLC

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

**OR**

- ☐ The electronic transmission of the record was defective.

  
Signature of Authorized Representative

05/29/14  
Date

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)