

# P20000031234

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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# COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: L3 Advisors, Inc.  
Name of Corporation

DOCUMENT NUMBER: P20000031234

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cassandra Walker  
Name of Contact Person

L3 Advisors, Inc.  
Firm/Company

5926 Patio Dr.  
Address

Boca Raton, FL 33433  
City/State and Zip Code

Sandy @ L3Advisors.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cassandra Walker at ( 561 ) 501-9976  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# ARTICLES OF CORRECTION

For

L3 Advisors, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

P20000031234

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct Articles of Incorporation  
(Document Type Being Corrected)

filed with the Department of State on 4-22-20  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Officer / Director Detail

Name & Address

Williams, Cassandra

Correct the inaccuracy, incorrect statement, or defect:

Officer / Director Detail

Name & Address

Walker, Cassandra

Cassandra Walker

(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Cassandra Walker

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00