

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000185628

**Entity Name:** L&E INSURANCE ADVISORS LLC

**Current Principal Place of Business:**

5287 BRACKS LANDING DR  
SAINT CLOUD, FL 34771

**Current Mailing Address:**

5287 BRACKS LANDING DR  
SAINT CLOUD, FL 34771 US

**FEI Number:** 88-2193934

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LONDONO, LUISA  
5287 BRACKS LANDING DR  
SAINT CLOUD, FL 34771 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LONDONO, LUISA  
Address 5287 BRACKS LANDING DR  
City-State-Zip: SAINT CLOUD FL 34771

Title MANAGER  
Name ELJURI, ERNESTO  
Address 5287 BRACKS LANDING DR  
City-State-Zip: SAINT CLOUD FL 34771

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUISA LONDONO

**MANAGER**

**06/26/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date