

L23000256556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

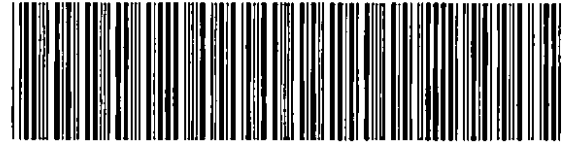
(Business Entity Name)

(Document Number)

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LLC Amend

07/12/24--01033--016 \*\*30.00

FILED  
2024 JUL 12 PM 12:34  
CLERK OF STATE  
IN ARKANSAS

JUL 23 2024  
A RAMSEY

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ENDEAVOR EVOLUTION ENTERPRISES LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOCEAN, WITSON

\_\_\_\_\_  
Name of Person

ENDEAVOR EVOLUTION ENTERPRISES LLC

\_\_\_\_\_  
Firm/Company

2020 NE 163RD STREET STE 300W

\_\_\_\_\_  
Address

NORTH MIAMI BEACH, FL 33162

\_\_\_\_\_  
City/State and Zip Code

LOCEANW@ENDEAVOREVOLUTIONENTERPRISES.COM

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

LOCEAN, WITSON

786 742-0844

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

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

**Street Address:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**  
2024 JUL 12 PM 12 34  
CLERK OF STATE  
TREASURY OF STATE  
HALL, JACKSONVILLE, FLORIDA

ENDEAVOR EVOLUTION ENTERPRISES LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/25/2023 and assigned  
Florida document number L23000256556.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

2020 NE 163RD STREET

SUITE 300W

NORTH MIAMI BEACH, FL 33162

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2020 NE 163RD STREET

SUITE 300W

NORTH MIAMI BEACH, FL 33162

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: LOCEAN, WITSON

New Registered Office Address: 2020 NE 163RD STREET SUITE 300W

*Enter Florida street address*

NORTH MIAMI BEACH, Florida 33162

*City*

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	LOCEAN, WITSON	2020 NE 163RD STREET	<input type="checkbox"/> Add
		STE 300W	<input type="checkbox"/> Remove
		NORTH MIAMI BEACH, FL 33162	<input checked="" type="checkbox"/> Change
AMBR	MACULA LOCEAN DAREUS	2020 NE 163RD STREET	<input type="checkbox"/> Add
		STE 300W	<input type="checkbox"/> Remove
		NORTH MIAMI BEACH, FL 33162	<input checked="" type="checkbox"/> Change
MGR	DOMINIQUE, SHAWN	2020 NE 163RD STREET	<input type="checkbox"/> Add
		STE 300W	<input type="checkbox"/> Remove
		NORTH MIAMI BEACH, FL 33162	<input checked="" type="checkbox"/> Change
MGR	GEOMARIS ISABEL MARTINEZ	2020 NE 163RD STREET	<input checked="" type="checkbox"/> Add
		STE 300W	<input type="checkbox"/> Remove
		NORTH MIAMI BEACH, FL 33162	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

**F. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 04 2024

Watson  
Signature of a member or authorized representative of a member

LOCEAN, WITSON

Typed or printed name of signee

**Filing Fee: \$25.00**