

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000090809

**Entity Name:** ENDOVERSE LLC

**Current Principal Place of Business:**

10910 SW 83RD AVE  
MIAMI, FL 33156

**Current Mailing Address:**

10910 SW 83RD AVE  
MIAMI, FL 33156 US

**FEI Number:** 85-0550109

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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 AMBR  
Name ERNSTOFF, NATHANIEL  
Address 811 CYPRESS GROVE LANE  
City-State-Zip: POMPANO BEACH FL 33069

Title AMBR  
Name SUSSMAN, DANIEL  
Address 10910 SW 83RD AVE  
City-State-Zip: MIAMI FL 33156

Title AMBR  
Name DESHPANDE, AMAR  
Address 1688 WEST AVE APT 908  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name ISSENBERG, SAUL BARRY  
Address 13745 NW 11TH ST  
City-State-Zip: PEMBROKE PINES FL 33028

*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:** NATHANIEL J ERNSTOFF

**AUTHORIZED MEMBER**

**02/24/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date