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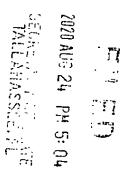
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COVER LETTER

TO: Registration : Division of Co				
Endureth	LLC			
SUBJECT:	Name of Lin	nited Liability Company	 -	
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.		
	nondence concerning this matter			
	Sandre Allen			
		Name of Person		_
	Endureth LLC			
		Firm/Company		_
	2220 NW 47th Terrace			
		Address		_
	Lauderhill Ft., 33313			2020 AUG 24
	 	City/State and Zip Code		NU6 21
	rallen2303@gmail.com			22
For further information	E-mail address: concerning this matter, please c	to be used for future annual repo all:	rt notification)	18 2 5 04 BH 2: 04
Ricardo Allen		965 682-11	08	04 04
Name	of Person	at () 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 (udditional copy is enclosed) Certified	te of Status &
Mailing Addre Registration Division of (P.O. Box 63	Section Corporations		· 	
Tallahassee,			onroe Street, Suite 8	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chaure	1 0 1	LLC	_	
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited L	ny as i <mark>t now appears on our r</mark> o Liability Company)	ecords.)	
The Articles of Organization for this Limited Florida document number 4.190000	Liability Company	were filed on $0/3$	1/2019 and	assigned
This amendment is submitted to amend the following	llowing:			
A. If amending name, enter the new name	of the limited liabi	lity company here:		
The new name must be distinguishable and contain the	words "Limited Liabili	ity Company," the designation	"LLC" or the abbreviation	ı "IlC."
Enter new principal offices address, if appli	icable:		· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>		AC L	2020 AJJ
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office a	ddress on our records, <u>e</u> i	nter the name of the	new registered
Name of New Registered Agent:	Ricardo Allen			40
New Registered Office Address:	2220 NW 47th T	l'errace		
		Enter Florida street ac	ddress	2711
	Lauderhill		. Florida ³³³¹³	

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

'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>	Type of Action
AMBR	Ricardo Allen	2220 NW 47th Terr Lauderhill FL, 33313	≣ Add
			□Remove
			□Change
			🗆 Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			🗆 Add
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Filing Fee: \$25.00