

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM397113

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the Assignee Name previously recorded on Reel 005833 Frame 0417. Assignor(s) hereby confirms the Change of Name.
RESUBMIT DOCUMENT ID:	900375975

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Endore LLC		09/15/2015	Limited Liability Company: FLORIDA

RECEIVING PARTY DATA

Name:	Tailored LLC
Street Address:	1720 J & C Blvd., Suite 6
City:	Naples
State/Country:	FLORIDA
Postal Code:	34109
Entity Type:	Limited Liability Company: FLORIDA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	4903879	TAILORED

CORRESPONDENCE DATA

Fax Number: 2392542942
Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.
Phone: (239) 254-2905
Email: trademarks@hahnlaw.com
Correspondent Name: Jeanne L. Seewald
Address Line 1: 5811 Pelican Bay Blvd., Suite 650
Address Line 4: Naples, FLORIDA 34108

NAME OF SUBMITTER:	Jeanne L. Seewald
SIGNATURE:	/jls/
DATE SIGNED:	09/01/2016

Total Attachments: 5

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source=Tailored Amended Articles of Organization#page1.tif

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TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Endore LLC		09/15/2015	Corporation: FLORIDA
RECEIVING PARTY DATA			
Name:	Endore LLC		
Street Address:	1720 J & C Blvd., Suite 6		
City:	Naples		
State/Country:	FLORIDA		
Postal Code:	34109		
Entity Type:	Corporation: FLORIDA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	4903879	TAILORED	
CORRESPONDENCE DATA			
Fax Number:	2392542942		
Phone:	(239) 254-2905		
Email:	trademarks@hahnlaw.com		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
Correspondent Name:	Jeanne L. Seewald		
Address Line 1:	5811 Pelican Bay Boulevard, Suite 650		
Address Line 4:	Naples, FLORIDA 34108		
NAME OF SUBMITTER:	Jeanne L. Seewald		
Signature:	/jls/		
Date:	07/13/2016		
Total Attachments: 3			
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source=Tailored Amended Articles of Organization#page3.tif

RECEIPT INFORMATION

ETAS ID: TM391245
Receipt Date: 07/13/2016
Fee Amount: \$40

TRADEMARK

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

Endore 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 March 1, 2012 and assigned Florida document number L12000031453.

This amendment is submitted to amend the following:

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

Tailored LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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 2012 SEP 28 A 11:30
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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>
MGR	Kristy Desmarais	603 Cypress Way E.	<input type="checkbox"/> Add
		Naples, FL 34110	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Dave J. Desmarais	603 Cypress Way E.	<input type="checkbox"/> Add
		Naples, FL 34110	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Shayne Velasquez	27600 Hacienda E. Blvd. #306D	<input checked="" type="checkbox"/> Add
		Bonita Springs, FL 34135	<input type="checkbox"/> Remove
			<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

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 TALLAHASSEE, FLORIDA

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

Multiple horizontal lines for amending information.

E. 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 earliest of: (b) The 90th day after the record is filed.

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2015 SEP 28 A 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated September 15, 2015

Dave J. Desmarais
Signature of a member or authorized representative of a member

Dave J. Desmarais

Typed or printed name of signee