

OMB APPROVAL	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Okumus Fund Management Ltd.</u> (Last) (First) (Middle) 767 THIRD AVENUE 35TH FLOOR (Street) NEW YORK NY 10017 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Endurance International Group Holdings, Inc. [EIGI]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 05/14/2019	
4. If Amendment, Date of Original Filed (Month/Day/Year) 05/14/2019		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	05/14/2019		P		50,000	A	\$4.9856 ⁽²⁾	14,418,900	D ⁽¹⁾	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>Okumus Fund Management Ltd.</u> (Last) (First) (Middle) 767 THIRD AVENUE 35TH FLOOR (Street) NEW YORK NY 10017 (City) (State) (Zip)		
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1. Name and Address of Reporting Person*		
Okumus Opportunistic Value Fund Ltd.		
(Last)	(First)	(Middle)
CRAIGMUIR CHAMBERS		
P.O. BOX 71, ROAD TOWN		
(Street)		
TORTOLA	D8	VG 1110
(City)		
(State)	(Zip)	
1. Name and Address of Reporting Person*		
OKUMUS AHMET H		
(Last)	(First)	(Middle)
C/O OKUMUS FUND MANAGEMENT LTD.		
767 THIRD AVENUE, 35TH FLOOR		
(Street)		
NEW YORK	NY	10017
(City)		
(State)	(Zip)	

Explanation of Responses:

- The reported securities are directly owned by Okumus Opportunistic Value Fund, Ltd.
- This Form 4 Amendment is being made to correct an error in the price per share of the last transaction reported on the Form 4 Amendment filed by the Reporting Persons with respect to the Issuer on May 14, 2019.

[Okumus Fund Management Ltd. By: /s/ Ahmet H. Okumus, 05/17/2019](#)
[President](#)
[Okumus Opportunistic Value Fund Ltd. By: /s/ Ahmet H. Okumus, 05/17/2019](#)
[Okumus, Director](#)
[By: /s/ Ahmet H. Okumus 05/17/2019](#)
 ** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.