L14000132726

(Re	equestor's Name)	
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(Cir	ty/State/Zip/Phone	e #)
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D. SCOTT MAR 1 4 2017

' COVER LETTER

TO:	Registration S Division of Co				
 SUBJE	Dalzell T	rading Consultants, LLC	٠.		
S C D C C		Name of Lin	nited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sul	bmitted for filing.		·
Please re	turn all correspo	ondence concerning this matter	r to the following:		
		David Dalzell			
			Name of Person		
		Dalzell Trading			
			Firm/Company		
		4 Woodbury Lane			
			Address		
		Natick, MA 01760		ا ن	
	•		City/State and Zip Code		
		DaveJDalzell@gmail.com			
For furth	er information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notifiall:	cation) . A .	1 1 1 1
Dave Da			508 6510760 at ()		五百万万
Enclosed		f Person ne following amount:	Area Code Daytime	Telephone Number	表 13 M O OO
	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dalzell Trading Consultants, 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 August 14, 2014 and assigned Florida document number L14000132726 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Dalzell Trading, 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: No change Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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:

AMBR =	- Authorized Member	No change	
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
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			Remove
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			□ Change

. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
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f an effective dat Note: If the da	e, if other than the date of filing:
ne record sp The 90th o	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: day after the record is filed.
Dated	3-8-000, 2017
	Signature of Comember of authorized representative of a mambar
	David J. Dalzel
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00