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COVER LETTER

Division of Cor				
Dividend T SUBJECT:	rade Fund, LLC			
SUBJECT.	Name of Lin	ited Liability Company		
	Amendment and fee(s) are sub	-		
Please return all correspo	ndence concerning this matter	to the following:		
	Richard A. Perea			
		Name of Person		
	Dividend Trade Fund, LL0	C		
		Firm/Company		
	3914 Turkey Oak Drive			
		Address		
-	Valrico, FL 33596			
		City/State and Zip Code		
•	rperea@dividendtradefund. E-mail address: (to be used for future annual report notification)	2016 SEC TALL	
For further information co	oncerning this matter, please c	all:		П
Richard A. Perea		813 651-5751	7.58 8.88 8.88 8.88 8.88 8.88 8.88 8.88	<u> </u>
Name of	f Person	at () Area Code Daytime Telephone	Number FOR S	j
Enclosed is a check for th	e following amount:		Day 2	
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)	

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

Florida document number L16000001633 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL 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) Florida 33596 B. If amending the registered agent and/or registered office address on our records, enter the name or registered agent and/or the new registered office address here:		Dividend Trade Fund, LLC
Florida document number L16000001633 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL 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) Florida 33596 B. If amending the registered agent and/or registered office address on our records, enter the name of the limited liability company here:	e of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	(Name of the Limited Liability Com (A Florida Limite
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC 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** **India Mailing address MAY BE A POST OFFICE BOX** **India Mailing address on our records, enter the name of the limited liability company here: **All Turkey Oak Drive** **Valrico** **Valrico** **Valrico** **Florida 33596* **Blorida 33596* **All Turkey Oak Drive** **Valrico** **Policida 33596* **All Turkey Oak Drive** **Valrico** **Policida 33596* **All Turkey Oak Drive** **Valrico** **Policida 33596* **All Turkey Oak Drive** **Valrico** **Valrico** **Policida 33596* **All Turkey Oak Drive** **Valrico** **Policida 33596*		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" The new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS	end the following:	amendment is submitted to amend the following:
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) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the projectered agent and/or the new registered office address here:	new name of the limited liability company here:	amending name, enter the new name of the limited li
Valrico Florida 33596	d contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C	w name must be distinguishable and contain the words "Limited Lie
Valrico Florida 33596	ess, if applicable: 3914 Turkey Oak Drive	new principal offices address, if applicable:
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Florida 33596 Valrico Florida 33596 B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	\$7-1-in-	
Walrico Florida 33596 3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:		
Walrico Florida 33596 3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	olicable: 3914 Turkey Oak Drive	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
Florida 33596 3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	W-bile-	
registered agent and/or the new registered office address here:	• • • • • • • • • • • • • • • • • • • •	
Name of New Registered Agent:	egistered office address here: Agent:	tered agent and/or the new registered office address he
New Registered Office Address:	Enter Florida street address	New Registered Office Address:
・	, Florida	
City Zip Gode _	Cim Tin Cada	

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member <u>Address</u> **Type of Action** <u>Title</u> <u>Name</u> _□ Add _□ Remove ☐ Change _□ Remove _□ Change □ Add ☐ Remove ☐ Change 2016 NEV 2 9e P 4: 1 ☐ Remove _□ Change ☐ Remove ☐ Change

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Effective date, if other than the date of filing:	(optional)	
f an effective date is listed, the date must be specific and cannot be pr Note: If the date inserted in this block does not meet the app		
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ne record specifies a delayed effective date, but in the 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the ear	rlier of:
Dated November 28 2016		
1/100		

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Typed or printed name of signee

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