4/16/2020

Division of Corporations Florida Department of State

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number

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REGISTERED AGENT CHANGE WGA FEEDER FUND INC.

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<u>:</u>

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	Florida	this	-
i. The name of	the corporation; WGA FEEDER FUND INC.			
2. The principal	office address: 2600 S. Douglas Road, Suite PH10, Coral Gables, FL 33134			
3. The mailing	address (if different):	 -		
4. Date of incor	poration/qualification: 08/28/2014 Document number: P14000	072208		
	d street address of the current registered agent and registered office on file verticent of State: (If resigned, enter resigned)	with the		
	Lopez, Padial & Levi, LLC	_		
	2600 S. Douglas Road, Suite PH10	_		
	Coral Gables, FL 33134	77 (c) 17 (17) 17 (17)	2020	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered of	SS Significance	2020 APR 16	
	C T Corporation System		A	: •
	c/o C T Corporation System, 1200 South Pine Island Road	201 1413	8: 44	
	P.O.Box NOT acceptable Plantation, Florida 33324	= 57	ţ	
The street addr as changed wil	ess of its registered office and the street address of the business office of the identical.	its registe	red age	nt,
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by arthe board, or the corporation has been notified in writing of the change.	officer s	o	
Gierardo Mahuad / Managing Principal Printed or typed name and title		1	_	
I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and co. I my duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered off that the corporation has been notified in writing of this change.	m as regis	stered ss, I	
C T Co By:	rporation System United Sucres 04/15/2020			
Sig	mature of Registered Agent Date			-
If signing on be	chalf of an entity:			
Angel Shearer, A				
1	'yped or Printed Name			

* * * FILING FEE: \$35.00 * * *