Office Use Only



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AUG () .. 2021 ! ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 944904 4803460

AUTHORIZATION : Spelle Ban

COST LIMIT : \$ 25.00

\_\_\_\_\_

ORDER DATE : August 4, 2021

ORDER TIME : 9:05 AM

ORDER NO. : 944904-010

CUSTOMER NO: 4803460

\_\_\_\_\_

## DOMESTIC AMENDMENT FILING

NAME: FGI GLOBAL ASSET ALLOCATION

GP, LLC

EFFECTIVE DATE:

XX \_ ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER'S INITIALS:

11/

## DocuSign Envelope ID: AD0BA85E-C433-4F4E-9B51-C2B1F5830CE0 COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

	Registration Se Division of Cor						
CHD ITA		Asset Allocation GP, LLC					
SUBJEC	.1:	Name of Lin	nited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please re	turn all correspo	ondence concerning this matter	to the following:				
		Blaine Ferguson					
			Name of Person				
		c/o CWA Asset Managem	ent Group, LLC				
			Firm/Company	<del></del>			
		9130 Galleria Ct 3rd Floor	r				
			Address				
		Naples, FL 34109					
			City/State and Zip Code				
		blaine@capitalwealthadvise	ors.com to be used for future annual report no	titiention			
For furth	er information c	oncerning this matter, please c					
Blaine F	erguson		239 434-7434 at ()				
Name of Person		Area Code Dayti	me Telephone Number				
Enclosed	is a check for the	ne following amount:					
<b>■</b> \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addres Registration S Division of C	Section	Street Address: Registration So Division of Co				

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: AD0BA85E-C433-4F4E-9B51-C2B1F5830CE0

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FGI Global Asset Allocation GP, 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 May 14, 2014 and assigned Florida document number \_\_\_\_\_L14000042634 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CW Natural Resources Fund GP, LLC 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) 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

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

DocuSign Envelope ID: AD0BA85E-C433-4F4E-9B51-C2B1F5830CE0
11 amending Authorized rerson(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>	Type of Action
MGR	D. Kyle Cerminara	108 Gateway Blvd Suite 204	
		Mooresville, NC 28117	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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fective date, if	other than the d	ate of filing:		. — — —	(op	tional)	
	listed, the date must t nserted in this bloc	e specific and ca k does not mee	nnot be prior to out the applicabl	late of filing or more e statutory filing	e than 90 days an requirements, ti	ter tiling.) Pursuai his date will not	it to 605.020 be listed a
n effective date is l	ve date on the Dep	artment of Stat	e's records.				
n effective date is I o <u>te:</u> If the date in							
n effective date is I ote: If the date in cument's effective							
n effective date is lote: If the date in cument's effective ecord specifies a	delayed effective	date, but not an	effective time	, at 12:01 a.m. or	the earlier of:	(b) The 90th d	lay after the
n effective date is I ote: If the date in cument's effective ecord specifies a	delayed effective	date, but not an	effective time	, at 12:01 a.m. or	the earlier of:	(b) The 90th d	lay after the
n effective date is lote: If the date in cument's effective ecord specifies a is filed.	delayed effective		effective time	, at 12:01 a.m. or	the earlier of:	(b) The 90th d	lay after the
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n effective date is lote: If the date is lote: If the date in cument's effective ecord specifies a is filed.  August	4 ligned by:	, -	2021			(b) The 90th d	lay after the
ecord specifies a is filed.  August	4 ligned by:	, -	2021	, at 12:01 a.m. or .		(b) The 90th d	lay after the

Filing Fee: \$25.00