L18000141710

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 944901 4803460

AUTHORIZATION

COST LIMIT THE SUBJECT OF ALL

ORDER DATE : August 4, 2021

ORDER TIME : 10:43 AM

ORDER NO. : 944901-010

CUSTOMER NO: 4803460

DOMESTIC AMENDMENT FILING

NAME: CWA FGI SPECIAL OPPORTUNITIES

FUND 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: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

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

Tallahassee, FL 32314

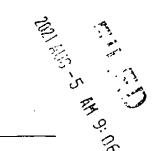
TO: Registratio Division of	n Section Corporations					
CWA I	FGI Special Opportunities Fund G	P, LLC				
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Article	s of Amendment and fee(s) are sul	bmitted for filing.				
Please return all corr	espondence concerning this matter	to the following:				
	Blaine Ferguson					
		Name of Person				
	c/o CWA Asset Managem	nent Group, LLC				
		Firm/Company				
	9130 Galleria Ct 3rd Floo	r				
	-	Address	<u></u>			
	Naples, FL 34109					
		City/State and Zip Code				
	blaine@capitalwealthadvis		<u>. </u>			
		(to be used for future annual report not	ification)			
For further informati	on concerning this matter, please o	call:				
Blaine Ferguson		239 434-7434 at ()				
Na	me of Person	Area Code Daytin	ne Telephone Number			
Enclosed is a check f	or the following amount:					
■ \$25.00 Filing Fe	e S30.00 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)			
<u>Mailing Ad</u> Registrativ	dress: on Section	Street Address: Registration Se	ection			
-	of Corporations	Division of Corporations				
P.O. Box		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



CWA FGI Special Opportunities Fund 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 66-07-2018 and assigned Florida document number L18000141710

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CW Special Opportunities Fund GP, 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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

DocuSign Envelope ID. AD0BA85E-C433-4F4E-9B51-C2B1F5830CE0
It 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>	Address	Type of Action
MGR	D. Kyle Cerminara	108 Gateway Blvd., Suite 204	□Add
		Mooresville, NC 28117	■Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		-	Change
			□Add
			Remove
			□Change
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			□Change
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			□Remove
			□ Change

Iffective date, if other than the date of filing:				· 					
Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member									
iote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the list filed. ated August 4									
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Filing Fee: \$25.00