

## Change Address or Representation Form

### Handwritten Signature

**Signature Section:**Signature: Date: MAY 18, 2020

Signatory's Name: Silvio F. Duarte

Signatory's Position: Legal Counsel

Signatory's Phone Number: 54-11-15-4171-8434

**NOTE TO APPLICANT:** When filed as part of the electronic form (i.e., scanned and attached as an image file), include only the signature page (no declaration is required, nor should any other information from the actual revocation be included).

The signatory has confirmed that he/she is either: (1) the owner/holder; or (2) a person or persons with legal authority to bind the owner/holder.

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