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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

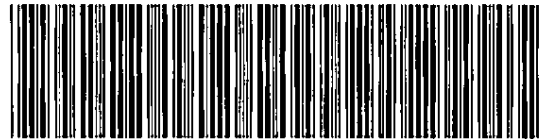
(Business Entity Name)

(Document Number)

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2022 SEP 21 PM 2:54
CLERK OF STATE
KATHY A. CUNY

A. BUTLER

DEC 20 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INTERPLANN LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julián Vila

Name of Person

Firm/Company

12417 NW 18th Court

Address

Pembroke Pines FL 33028

City/State and Zip Code

eltato10@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julián Vila

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INTERPLANN LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 SEP 21 PM 2:54

The Articles of Organization for this Limited Liability Company were filed on 02/11/2016 and assigned
Florida document number L16000029999.

This amendment is submitted to amend the following:

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

FACTUM INVESTMENTS 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:

Julián Vila

New Registered Office Address:

12417 NW 18th Court

Enter Florida street address

Pembroke Pines

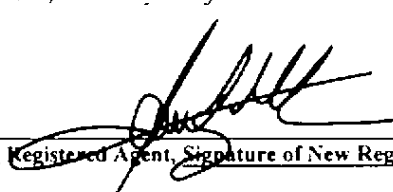
, Florida 33028

City

Zip Code

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.


If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(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>	<u>Type of Action</u>
MGR	Cohen, Joel David		<input type="checkbox"/> Add
		1619 Passion Vine CircleWeston, FL 3332	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Julián Vila	12417 NW 18th CourtPembroke Pines FL 33028Estate	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated September, 14 2022

Julián Vila

Typed or printed name of signee

Filing Fee: \$25.00