

M16000007093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

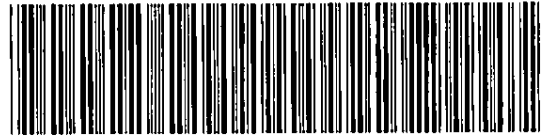
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

wrong form

Office Use Only



000309295170

02/21/18--01018--006 \*\*43.75

FILED  
18 MAY 25 PM 3:24  
FBI - JAX



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 6, 2018

MICHAEL CALLAN  
6075 CALIFORNIA AVE SW  
SEATTLE, WA 98136

SUBJECT: INTERWORKS US, LLC  
Ref. Number: M16000007093

We have received your document for INTERWORKS US, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please submit a certified copy showing name change from your state of Washington.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III

Letter Number: 818A00007020

RECEIVED  
2018 MAY 25 AM 10:48  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2018

MICHAEL CALLAN  
6075 CALIFORNIA AVE SW  
SEATTLE, WA 98136

SUBJECT: INTERWORKS US, LLC  
Ref. Number: M16000007093

We have received your document for INTERWORKS US, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Please submit a certified copy showing the name change from Secretary of State of Washington.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 518A00005407

**RECEIVED**  
APR 02 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2018

MICHAEL CALLAN  
6075 CALIFORNIA AVE SW  
SEATTLE, WA 98136

SUBJECT: INTERWORKS US, LLC  
Ref. Number: M16000007093

We have received your document for INTERWORKS US, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Foreign LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 718A00003708

RECEIVED

2018 MAR 12 AM 10:50

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Interworks US, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael R. Callan

Name of Person

IWCP, LLC

Firm/Company

6075 California Ave SW

Address

Seattle, WA 98136

City/State and Zip Code

dwilliams@williams-callan.com

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

For further information concerning this matter, please call:

Leanne Burton

Name of Person

at ( 206 ) 981-3192

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Interworks US, LLC

Enter new principal office address, if applicable: no change

(Principal office address)  
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

(Mailing address)  
MAY BE A POST OFFICE BOX

no change

2. The Florida document number of this limited liability company is: M16000007093

3. Jurisdiction of its organization: Washington

4. Date authorized to do business in Florida: 9-7-2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: IWCP, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: no change

New Registered Office Address: no change

Enter Florida Street Address

City, Florida 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

no change

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

no change

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Michael R. Callan*  
Signature of the authorized representative

Michael R. Callan

Typed or printed name of signee

Filing Fee: \$25.00



# SOS

Office of the Secretary of State  
Corporations & Charities Division

## Limited Liability Company

See attached detailed instructions

☐ Filing Fee \$30.00

☒ Filing Fee with Expedited Service \$80.00

This Box For Office Use Only

08/25/16 3248544-001

\$80.00 K

tid: 3311300

FILED

SECRETARY OF STATE

AUGUST 25, 2016

STATE OF WASHINGTON

UBI Number:

**603 470 938**

## CERTIFICATE OF AMENDMENT

Chapter 23.95 RCW

### SECTION 1

**NAME OF LIMITED LIABILITY COMPANY (LLC):** (as currently recorded with the Office of the Secretary of State)  
Interworks US, LLC

### SECTION 2

**AMENDMENTS TO CERTIFICATE:** (if necessary, attach additional information. If changing the name it must contain one of the following designations: Limited Liability Company, Limited Liability Co or one of these abbreviations: L.L.C. or LLC. If the designation is omitted, it will default to LLC when processed)

Change Name to "IWCP, LLC"

### SECTION 3

**EFFECTIVE DATE OF AMENDMENTS TO CERTIFICATE:** (please check one of the following)

☒ Upon filing by the Secretary of State

☐ Specific Date: \_\_\_\_\_ (Specified effective date must be within 90 days AFTER the Amended Certificate has been filed by the Office of the Secretary of State)

### SECTION 4

**EXECUTOR INFORMATION** (see instructions page)

*This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.*

*Michael R. Callan*  
Signature

Michael R. Callan, CEO  
Printed Name/Title

8/23/2016  
Date

206-981-3106  
Phone



I, Kim Wyman, Secretary of State of the State of Washington and custodian of its seal, hereby certify the foregoing is a true and accurate copy of the record on file in this office.

APR 18 2018

*EW*

Given under my hand and the Seal of the State of Washington in Olympia, the State Capital.

Total Pages: 1 *Kim Wyman*

