

Information submitted via Top Hat Plan Statement Online Filing System to U. S.  
Department of Labor under 29 CFR 2520.104-23

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Confirmation Number: 15734

Amended Confirmation Number:

Employer Information

Name: FARO FACTORING LLC  
Address: 7613 ROCIO DR STE 101  
City: LAREDO  
State: TX  
Zip Code: 78041

Plan Administrator Information

Name: RAFAEL GUTIERREZ  
Address: 2701 Seve Ln  
City: LAREDO  
State: TX  
Zip Code: 78045  
Phone: 9565681190  
Email: accounting@farocompanies.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	401(K)PROFITSHARINGPLAN&TRUST	Number of Employees: 5
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Additional Information:



U. S. Department of Labor  
Employee Benefits Security Administration  
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 15734. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.