

State of Rhode Island and Providence Plantations Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 Fee: \$50.00

(401) 222-3040

Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. **ID No.** 000792903

2. Exact Name of the Limited Liability Company Omega RMS, LLC

3. State of Formation

State: MO

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Third party consumer collections agency.

5. Principal Office Address

No. and Street: 7505 NW TIFFANY SPRINGS PARKWAY

SUITE 500

City or Town: KANSAS CITY State: MO Zip: 64153 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: <u>7505 NW TIFFANY SPRINGS PARKWAY</u>

SUITE 500

City or Town: KANSAS CITY State: MO Zip: 64153 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	EDWARD JOHN VASQUES	14005 NW 63RD ST PARKVILLE, MO 64152 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 28 Day of August, 2015 at 3:31:21 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By TERRI EATMAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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