



State of Rhode Island and Providence Plantations

Department of State - Business Services Division
Application for Registration
FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

 RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2018 MAY 29 PM 12:19

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Midwest Fidelity Services, LLCIs this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☒

The name, if different, under which it proposes to register and transact business in Rhode Island is:

N/A

2. The LLC is organized under the laws of: **Kansas**3. The date of its organization is: **04/11/2012**And the period of its duration is: **CHECK ONE BOX ONLY**☒ Perpetual (on-going)☐ Date certain for dissolution _____

4. The name and address of the resident agent/office in Rhode Island is:

Agent Name **Corporation Service Company**Street Address (NOT a P.O. Box) **222 Jefferson Boulevard Suite 200**City/Town **Warwick**State **RHODE ISLAND**Zip Code **02888**

5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Collection Agency- To call consumer for debt they oweCheck the box to indicate an attachment ☐**MAIL TO:****Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov
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 FORM 450 - Revised: 11/2017

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:

103 S Main St, Ottawa, KS 66067

8. The mailing address for the limited liability company is:

103 S Main St, Ottawa, KS 66067

9. Management of the Limited Liability Company:

The Limited Liability Company is to be managed by: **CHECK ONLY ONE BOX**

☐ By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

☒ By one (1) or more managers (List managers below)

MANAGER	ADDRESS
Mike Powell	103 S Main St, Ottawa, KS 66067

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.

11. Date when this application for Certificate of Registration will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of LLC

Midwest Fidelity Services, LLC

Date

05/23/2018

Signature of Authorized Person

 DOCUMENT HERE

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6638811

Entity Name: MIDWEST FIDELITY SERVICES, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: MIKE POWELL

Registered Office: 5 Stubblefield Lane, OTTAWA, KS 66067

was filed in this office on April 11, 2012, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 17, 2018

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 1053300 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

May 29, 2018 12:19 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

