

State of Rhode Island
Department of State - Business Services Division

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u>, 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:

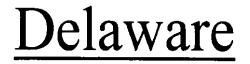
1. The name of the limited liability company is:				
RGS Finanical, LLC				
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes 🔲 No 🖌				
The name, if different, under which it proposes to regist	er and transact business in Rh			
N/A				
2. The LLC is organized under the laws of: Delaware				
3. The date of its organization is: 7/18/2023				
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 Cogency Global, Inc.				
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard				
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:				
3rd Party Debt Collection				
Check 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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BY VJTTT	FORM 450 - Revised: 8-2023

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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:				
1700 Jay Ell	Drive	, surte 200,	Richardson, TX 750F	
8. The mailing address for the limited liabi				
1700 Jay Ell Drive, Suite 200, Richardson, TX 75081				
9. Management of the Limited Liability Co.	mpany: CHE	CK ONLY ONE BOX		
Members (Owners) DO NOT complete the chart below.	OR	Managers (Individuals hired by the members with no ownership interest) Complete the chart below.		
		MANAGER NAME	ADDRESS	
		Che	eck the box to indicate an attachment	
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.				
11. Date when this application for Certifica	ite of Registra	ation will be effective: CHI	ECK ONE BOX ONLY	
Date received (Upon filing)				
Later effective date (Date must be no more than 90 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			Date 9/1/23	
Signature of Authorized Person				



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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF 'RGS FINANCIAL, LLC' FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF JULY, A.D. 2023, AT 1:42 O'CLOCK P.M.



7575348 8100F SR# 20233021479

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203771569 Date: 07-18-23

State of Rhode Island Department of State | Office of the Secretary of State Gregg M. Amore, Secretary of State

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

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:

November 07, 2023 12:30 PM

Treng M. Course

Gregg M. Amore Secretary of State

