

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000006442

**Entity Name:** OMT FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

960 GOTHIC MANOR WAY  
KNOXVILLE, TN 37923

**Current Mailing Address:**

960 GOTHIC MANOR WAY  
KNOXVILLE, TN 37923

**FEI Number:** 01-0648670

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MANDEL, PAUL GARBER  
Address 960 GOTHIC MANOR WAY  
City-State-Zip: KNOXVILLE TN 37923

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL GARBER MANDEL

MANAGIN MEMBER

01/14/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date