2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000095455

Entity Name: DIVERSIFIED PHYSICIAN SOLUTIONS, LLC

Current Principal Place of Business:

2500 LAKE RUBY RD DELAND, FL 32724

Current Mailing Address:

104 E. MICHIGAN AVE #204 LAKE HELEN, FL 32744 US

FEI Number: 47-1074645

Name and Address of Current Registered Agent:

BURGESS, TAMMY M 2500 LAKE RUBY RD DELAND, FL 32724 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

Authorized Person(s) Detail :

Title	AMBR	Title	PRESIDENT RCM SERVICES
Name	HULEC, DENA E	Name	BURGESS, TAMMY
Address	513 N KEPLER ROAD	Address	2500 LAKE RUBY RD
City-State-Zip:	DELAND FL 32724	City-State-Zip:	DELAND FL 32724

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TAMMY BURGESS

PRESIDENT

04/01/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 01, 2019 Secretary of State 0073148614CC

Certificate of Status Desired: Yes

Date