

**2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000118296

**Entity Name:** D R SOLUTIONS GROUP LLC**Current Principal Place of Business:**2645 EXECUTIVE PARK DRIVE  
SUITE 685  
WESTON, FL 33331**Current Mailing Address:**2645 EXECUTIVE PARK DRIVE  
SUITE 685  
WESTON, FL 33331 US**FEI Number:** 83-0581184**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**D R SOLUTIONS GROUP LLC  
2645 EXECUTIVE PARK DRIVE  
SUITE 685  
WESTON, FL 33331 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:** LUCIS REECE JR

08/31/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name REECE, LUCIS REECE JR  
Address 2645 EXECUTIVE PARK DRIVE  
SUITE 685  
City-State-Zip: WESTON FL 33331

Title DIRECTOR  
Name MADISON, TATIANA  
Address 2645 EXECUTIVE PARK DRIVE  
SUITE 685  
City-State-Zip: WESTON FL 33331

Title PRESIDENT  
Name WILLIAMS, BOBBY  
Address 2645 EXECUTIVE PARK DRIVE  
SUITE 685  
City-State-Zip: WESTON FL 33331

Title AUTHORIZED MEMBER  
Name REECE, TYLER LUCIS  
Address 2645 EXECUTIVE PARK DRIVE  
SUITE 685  
City-State-Zip: WESTON FL 33331

Title VP  
Name REECE, KOBE  
Address 2645 EXECUTIVE PARK DRIVE  
SUITE 685  
City-State-Zip: WESTON FL 33331

*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:** LUCIS REECE JR

MGR

08/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date