

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000077660

Entity Name: DR PRODUCTS, L.L.C.

FILED  
Oct 11, 2006  
Secretary of State

**Current Principal Place of Business:**

109 VISTA AVE.  
EUSTIS, FL 327262012

**New Principal Place of Business:**

2511 WAYCROSS AVE.  
EUSTIS, FL 327265217

**Current Mailing Address:**

109 VISTA AVE.  
EUSTIS, FL 327262012

**New Mailing Address:**

2511 WAYCROSS AVE.  
EUSTIS, FL 327265217

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RAY, DANIEL  
109 VISTA AVE.  
EUSTIS, FL 327262012 US

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

RAY, DANIEL  
2511 WAYCROSS  
EUSTIS, FL 327265217 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: DANIEL RAY

10/11/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RAY, DANIEL  
Address: 109 VISTA AVE.  
City-St-Zip: EUSTIS, FL 327262012

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RAY, DANIEL  
Address: 2511 WAYCROSS AVE.  
City-St-Zip: EUSTIS, FL 327265217

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: DANIEL RAY

MGRM

10/11/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date