

State of Rhode Island

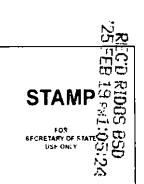
Department of State - Business Services Division

Annual Report for the year: 2023 **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25,00 fee if form is not filed by May 31.



1. Entity ID Number 001730583		2. Exact name of the Limited Liability Company DLZP Group, LLC			
3. NAICS Code 541512	4. Brief description of the ch	4. Brief description of the character of business conducted in Rhode Island 1T Consulting for ERP, Cloud, Cybersecurity and new technology			
5. State of Formation					
6. Principal Office Address	<u> </u>	City	State	Zip	
9711 S Mason Rd, Ste 125-116		Richmond	TX	77407	
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person			
Contact Name Lisa Brunet		Contact Title CEO			
Street Address 9711 S Mason Rd, Ste 125-116		City Richmond	State TX	^{Zip} 77407	
8. The Resident Agent infor	mation currently of record with the	RI Department of State is accur	rate. Changes require	e filing Form 642.	
	y, I declare and affirm that I have tatements contained herein are t		ing any accompany	ing schedules and	
Name of Authorized Person			Date		
Lisa Brunet			2/18/2025		
Signature of Authorized Per			•	.	
Lisa Bri	unet			_	

FILED

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BY KOBCH

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov