PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 02 WAS

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV -1 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000037990

1. Corporation Name

DLG ART, INC.

Principal Place of Business	Mailing Address
700 EUCLID AVENUE UNIT G1 MIAMI BEACH FL 33139	700 EUCLID AVENUE UNIT G1 MIAMI BEACH FL 33139

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 1340 LINCOLN Rd #301	Suite, Apt. #, etc. 1340 LINCOLN Rd #301
City & State MIAMI BEACH, FL.	City & State MIAMI BEACH, FL
Zip 33139 Country US	Zip 33139 Country US

4. Date Incorporated or Qualified To Do Business in Florida: 04/17/2000

5. FEI Number: 65-0999737 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	DE LA GUARDIA, ANTONIO	700 EUCLID AVENUE	MIAMI BEACH FL 33139

500008752735
11/01/02--01029--005 **150.00

8. Name and Address of Current Registered Agent

LA GUARDIA, ANTONIO DE
700 EUSLIO AVE
MIAMI FL 33139

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City | State FL | Zip Code

CR2E040 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent SIGNATURE REQUIRED Date 10/28/02
REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: SIGNATURE REQUIRED 10/28/02 (786)8974947
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

October 29, 2002

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

This letter is to inform you that I did not receive the two prior uniform business reports (UBR) notices due to the fact that the address that you have in file is wrong. Moreover, this notice was given to me by the person who currently lives in that address. My new address is 1340 Lincoln Rd. # 301, Miami Beach, FL 33139.

I would like to ask you to please reinstate my company without any fees since my lack of payments was due to a mailing mistake.

I am very sorry for any inconveniences this may have caused you. If you have any questions, please do not hesitate to contact me at (786)897-4947.

Sincerely,

Antonio de la Guardia