

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F03000001333

**Entity Name:** D P L ASSOCIATES LTD. CORP.

**FILED**  
**Oct 07, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

24 NORTH PARK TERRACE  
CONYERS, NY 10920

**New Principal Place of Business:**

24 NORTH PARK TERRACE  
CONGERS, NY 10920

**Current Mailing Address:**

PO BOX 188  
CONYERS, NY 10920

**New Mailing Address:**

PO BOX 188  
CONGERS, NY 10920

**FEI Number:** 13-2730629

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEXISNEXIS DOCUMENT SOLUTIONS INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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: DAVID LURIA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: LURIA, DAVID PAUL  
Address: 655 POMANDER WALK UNIT528  
City-St-Zip: TEANECK, NJ 07666- 16

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID LURIA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/07/2013

\_\_\_\_\_  
Date