

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10/2

FILED

01 AUG 10 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000032798

1. Corporation Name

DD LAUDERDALE CORP.

2. Principal Office Address
c/o DRA Advisors, Inc.
220 E. 42nd St.

Suite, Apt. #, etc.

27th Fl.

City & State

New York, NY

Zip

10017

Country

USA

3. Mailing Office Address
c/o DRA Advisors, Inc.
220 E. 42nd St.

Suite, Apt. #, etc.

27th Fl.

City & State

New York, NY

Zip

10017

Country

USA

REINSTATEMENT 9961

4. Date Incorporated or Qualified
To Do Business in Florida 04/09/98

5. FEI Number
13-4001476

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

500004528395--4

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Tatatha Miller ASST VP

Date 8/9/01

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Francis X. Tansey	c/o DRA Advisors, Inc. 220 E. 42nd St., 27th Fl.	New York, NY 10017
V.P.- Sec.	David Luski	c/o DRA Advisors, Inc. 220 E. 42nd St., 27th Fl.	New York, NY 10017
V.P.- Treas	Brian Summers	c/o DRA Advisors, Inc. 220 E. 42nd St., 27th Fl.	New York, NY 10017
V.P.- Asst. Sec.	Andrew E. Peltz	c/o DRA Advisors, Inc. 220 E. 42nd St., 27th Fl.	New York, NY 10017 LS

10. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian Summers, Vice Pres.

Date

8/9/01

212-697-4740

Daytime Phone #

CR2E081 (9/00)



2072

ACCOUNT NO. : 072100000032

REFERENCE : 409796 4302355

AUTHORIZATION :

Patricia Pizutto

COST LIMIT : \$ 1050.00

ORDER DATE : August 9, 2001

ORDER TIME : 9:40 AM

ORDER NO. : 409796-005

CUSTOMER NO: 4302355

CUSTOMER: Ralph D. Mosley, Legal Asst
Blank Rome Tenzer Greenblatt
15th Floor
405 Lexington Avenue
New York, NY 10174

DOMESTIC FILINGS

NAME: DD LAUDERDALE CORP.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight 1156

EXAMINER'S INITIALS _____

RECEIVED
01 AUG 10 AM 10:27
DIVISION OF CORPORATION