

F03000001333

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Deena Yeager ~~NAME~~

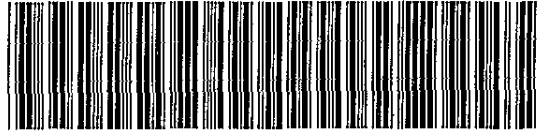
AUTHORIZATION BY PHONE TO

CORRECT suffix by adding

DATE 3/18/03

DOC. EXAM J. Bry

Corp. also filing list of Officers.



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2003 MAR 17 AM 11:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAR 18 2003



Cornerstone Support, Inc.

Florida Secretary of State
Secretary of State
409 East Gaines St.
Tallahassee, FL 32399

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Wednesday, March 12, 2003

Dear Florida Secretary of State,

D P L Associates Ltd.. Is applying for a certificate of authority in order to do business within your state. They have hired us, Cornerstone Support, Inc., to help them with the process.

Please find enclosed a Certificate of Authority application with the required attachments an fees.

If you have any problems or questions please contact: Deena Yeager at 770-587-4595

Mail any correspondence to:
Deena Yeager
Cornerstone Support, Inc.
16 Norcross Street Suite 101
Roswell, GA 30075

Sincerely,

Deena Yeager
Project Manager
Cornerstone Support, Inc.

TRANSMITTAL LETTER

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: D P L Associates Ltd
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Deena Yeager
(Name of Person)
Cornerstone Support, Inc.
(Firm/Company)
16 Norcross St. Suite 101
(Address)
Roswell, GA 30075
(City/State and Zip code)

For further information concerning this matter, please call:

Deena Yeager at () 770-587-4595
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE 97TH SECTION 60 7.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED To REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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1. D P L Associates Ltd Corp.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. NY 3. 13-2730629
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 8/16/71 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 280 North Central Ave Hartsdale NY 10530
(Principal office address)
same as above
(Current mailing address)
8. Debt Collection
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: LexisNexis Document Solutions Inc.
Office Address: 3953 W. W. Kelley Road
Tallahassee, Florida 32311
(City) (Zip code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kyria Webb, Asst. Secretary
(Registered agent's signature)

I 1. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: No directors required in NY

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: See Attached List of Officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

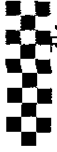
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David Fune

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David Lora President

(Typed or printed name and capacity of person signing application)



FROM : CORNERSTONE SUPPORT

FAX NO. : 7705872440

Mar. 18 2003 11:17AM P1

D P L Associates Ltd
LIST OF OFFICERS/OWNERS

Sole Corporate Officer/Owner

David Paul Luria

5880 Royal Isles Blvd.

Boynton Beach FL

33437

561-733-5116

SOCIAL SECURITY NUMBER:

DATE OF BIRTH: 09-12-32

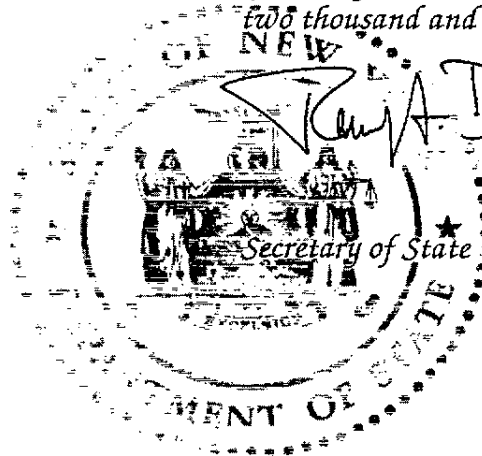
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TALLAHASSEE, FLORIDA

State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of D P L ASSOCIATES LTD. was filed on 08/16/1971, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Biennial Statement is past due.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 07th day of March
two thousand and three.



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