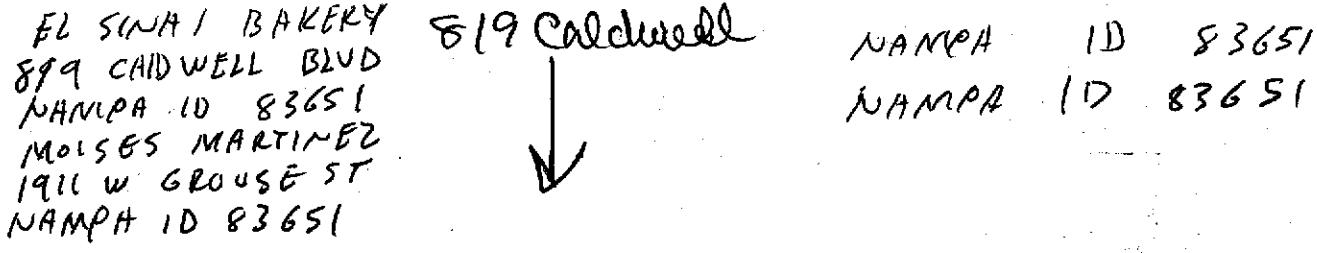


REINSTATEMENT

| | | | | | |
|---|---|---|---|--|--|
| No. W 55743 | Annual Report Form ADMIN DISSOLVED 01/06/2009 | | 2. Registered Agent and Office NOT A P.O. BOX | | |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00 | 1. Mailing Address - Correct in this box, if applicable EL SINAI BAKERY LLC MOISES MARTINEZ 819 CALDWELL BLVD NAMPA, ID 83651 | | MOISES MARTINEZ 1911 W GROUSE ST NAMPA, ID 83651 | | |
| | | | 3. <u>New registered agent signature</u> | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. Office held <u>Name</u> <u>Street or P.O. Address</u> <u>City</u> <u>State</u> <u>Zip</u>  | | | | | |
| 5. Organized under the laws of: IDAHO W 55743 | | 6. Signature <u>MOISES MARTINEZ</u> Date <u>01-21-09</u> Name (Typed or Printed) <u>MOISES MARTINEZ</u> Title <u>01-21-09</u> | | | |

Issued 1/13/2009 by LJM