

FILED
EFFECTIVE

No. W 53273	Reinstatement Annual Report Form ADMIN DISSOLVED 11/08/2007		2. Registered Agent and Office (NOT A P.O. BOX) PATRICK O'HALLORAN 738 S CENTER VALLEY RD SANDPOINT ID 83864																					
Return to: SECRETARY OF STATE 480 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT -----+-----	1. Mailing Address: Correct in this box if needed. SUFFOLK FARM, LLC 738 S CENTER VALLEY RD SANDPOINT ID 83864																							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>PATRICK MICHAEL O'HALLORAN</td> <td>738 S. CENTER VALLEY RD</td> <td>SANDPOINT</td> <td>ID</td> <td>BARNER</td> <td>83864 USA</td> </tr> <tr> <td>MANAGER</td> <td>MARIA J. O'HALLORAN</td> <td>738 S. CENTER VALLEY RD</td> <td>SANDPOINT</td> <td>ID</td> <td>83864</td> <td>USA</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	MANAGER	PATRICK MICHAEL O'HALLORAN	738 S. CENTER VALLEY RD	SANDPOINT	ID	BARNER	83864 USA	MANAGER	MARIA J. O'HALLORAN	738 S. CENTER VALLEY RD	SANDPOINT	ID	83864	USA
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5. Organized Under the Laws of: IDAHO W 53273 Issued 06/02/2008 by CLH		6. Signature: <u>Patrick M. O'Halloran</u> Date: <u>06/02/08</u> Name (type or print): <u>PATRICK M. O'HALLORAN</u> Title: <u>MANAGER</u>																						