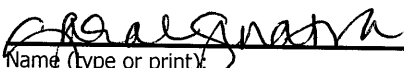
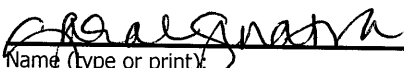
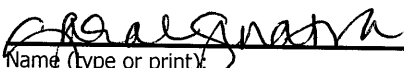


| | | | |
|---|--|--|---|
| No. W 95037 | Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2012 | | 2. Registered Agent and Office (NOT A P.O. BOX) SARAH ANN SINATRA 17145 HOADLEY RD CALDWELL ID 83607 |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 | 1. Mailing Address: Correct in this box if needed. SINATRA'S CATERING CO., LLC SARAH ANN SINATRA 17145 HOADLEY RD CALDWELL ID 83607 | | 3. <u>New</u> Registered Agent Signature. |

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code |
|---|---------------|----------------------|-----------|-------|---------|-------------|
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Sarah Sinatra | 17145 Hoadley Rd | Caldwell, | ID | | 83607 |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Steve Sinatra | 17145 Hoadley Rd | Caldwell, | ID | | 83607 |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |

| | | | |
|--|---|---|--------------------------------------|
| 5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 95037</div> | 6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  Name (type or print): Sarah Sinatra </td> <td style="width: 40%;"> Date: 11/11/12 Title: owner </td> </tr> </table> | Signature:  Name (type or print): Sarah Sinatra | Date: 11/11/12 Title: owner |
| Signature:  Name (type or print): Sarah Sinatra | Date: 11/11/12 Title: owner | | |

Issued 10/17/2012 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM