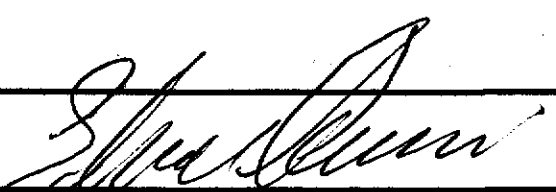


No. W 63855	Reinstatement Annual Report Form ADMIN DISSOLVED 09/08/2009		2. Registered Agent and Office (NOT A P.O. BOX) COSTEA DEMBI 320 11TH AVE S STE 101 NAMPA ID 83651															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ELISABETA EUROPEAN MARKET, LLC 320 11TH AVE S STE 101 NAMPA ID 83651		3. New Registered Agent Signature.															
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></td> <td>ELIZABETH DEMBI</td> <td>8027 LAKESHORE DR</td> <td>NAMPA</td> <td>ID</td> <td></td> <td>83686</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code		ELIZABETH DEMBI	8027 LAKESHORE DR	NAMPA	ID		83686
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
	ELIZABETH DEMBI	8027 LAKESHORE DR	NAMPA	ID		83686												
5. Organized Under the Laws of: IDAHO W 63855		6. Signature:  Date: <u>10/15/09</u> Name (type or print): <u>Elizabeth Dembi</u> Title: _____																
Issued 09/15/2009 by LJM																		

FILED EFFECTIVE