LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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DOCUMENT # LO100000 9138

1. Limited Liability Company's Name

BAJA Restaurant, LLC

2. Principal Office Address
17037 Royal Cove Way

Suite, Apt. #, etc.

City & State
Boca Raton FL

Zip 33496 | Country USA

3. Mailing Office Address
17037 Royal Cove Way

Suite, Apt. #, etc.

City & State
Boca Raton FL

Zip 33496 | Country USA

4. State/Country of Formation
Florida

5. Date Organized or Qualified To Do Business in Florida 6-5-01

6. FEI Number 65-1177050 | Applied For / Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ | $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name Gregg Wiston

Street Address (P.O. Box Number is Not Acceptable)
5532 Baja Terrace

Suite, Apt. #, Etc.

City Greenacres | State FL | Zip Code 33463

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08/17/04--01070--002 **255.00

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent _____ Date 7-29-04

REGISTERED AGENT MUST SIGN

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mr.	Derek Wiston	7919 NW 63rd Way	Parkland F 33067

REINSTATEMENT 2002-2003 2004

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager _____ Date 8/2/04 Daytime Phone # (561)637-0796

Typed or printed name of signing Managing Member/Manager Derek Wiston