



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

NOV 28 AM 9:15
STATE OF IDAHO

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-1001

1. The name of the limited liability partnership is: Debban Brother's Home Improvement & Custom Cabinet Shop, L.L.P.

2. If previously filed a statement of partnership, the name used in that statement is:

The date it was filed with the Idaho Secretary of State's Office was: _____

3. The street address of the limited liability partnership's chief executive office is:

234 North Tenth Street, Payette, ID 83661

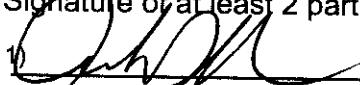
4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____

5. The mailing address for future correspondence is: 234 North Tenth Street, Payette, ID 83661

6. The above-named partnership elects to be a limited liability partnership.

7. Future effective date (optional): _____

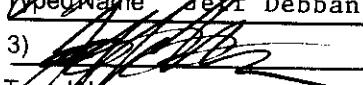
8. Signature of at least 2 partners:

1) 

Typed Name John Debban

2) 

Typed Name Jeff Debban

3) 

Typed Name _____

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Secretary of State use only

IDaho SECRETARY OF STATE
11/28/2003 05:00
CK: 2842 CT: 174636 BH: 713867
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