



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

Instructions are included on back of application.

FILED EFFECTIVE

Signature to clear form.

AM 8:58

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

The Woodmill

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

J&L Cabinets, LLC

4610 W. Seltice Way, Ste. B, Post Falls, ID 83854

(W98534)

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

J&L Cabinets, LLC

4610 W. Seltice Way, Ste. B

Post Falls, ID 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Brent G. Schlotthauer, Attorney

P.O. Box 808

Coeur d' Alene, ID 83816

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: [Signature]

Printed Name: Jerry W. Eckard

Capacity/Title: Managing-Member

Signature: [Signature]

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE
12/21/2010 05:00
CK: 1420 CT: 173163 DH: 1251785
1 @ 25.00 = 25.00 ASSUM NAME # 2

D144060