

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly.

NOTE: See instructions on reverse before filing. SECKEDARY OF S



| Northwest Cabinet Sales | |
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| The true name(s) and business address(es) of business under the assumed business name: | the entity or individual(s) doing Complete Address 5056 Harbourview Drive Boise, ID 83703 |
| 3. The general type of business transacted under Retail Trade Transportation an | |
| Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Northwest Cabinet Sales 5056 Harbourview Drive | Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 |
| Boise, ID 83703 5. Name and address for this acknowledgment copy is (if other than # 4 above): | Phone number (optional): |
| · · · · · · · · · · · · · · · · · · · | Secretary of State use only |
| gnature: | Revised Ou/2003 |

10AHU SECKETARY OF STATE 96/19/2003 05:00 CK: 2781 CT: 158010 BH: 686951 1 @ 25.00 = 25.00 ASSUM NAME # 2

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