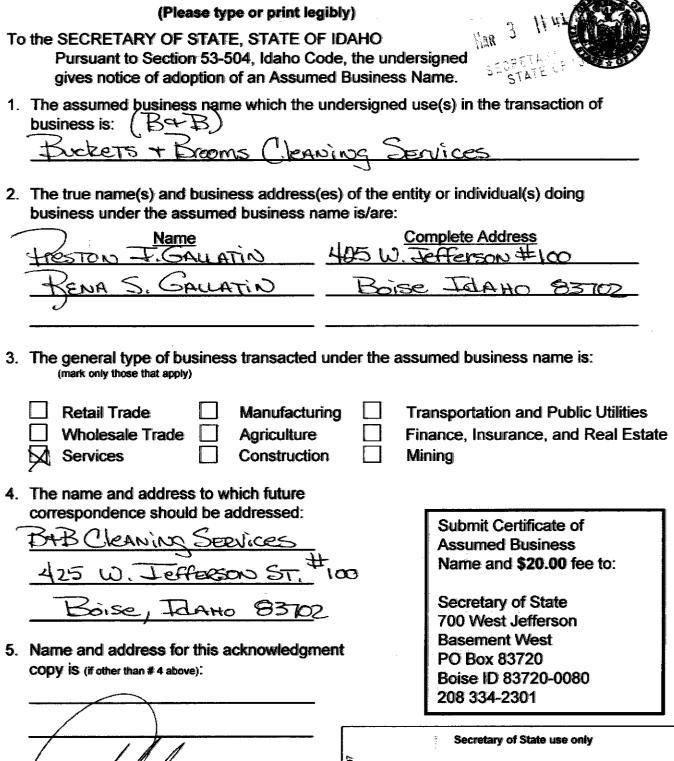
CERTIFICATE OF ASSUMED BUSINESS NAME



IDANO SECRETARY OF STATE
DATE 03/04/1997
0900 69497 2
CX #: 1318 CUST# 77561
ASSUM NOME 19 20.00= 20.00

MANAGER
(see instruction # 8 on back of form)

Signature

Capacity

Printed Name:

: D