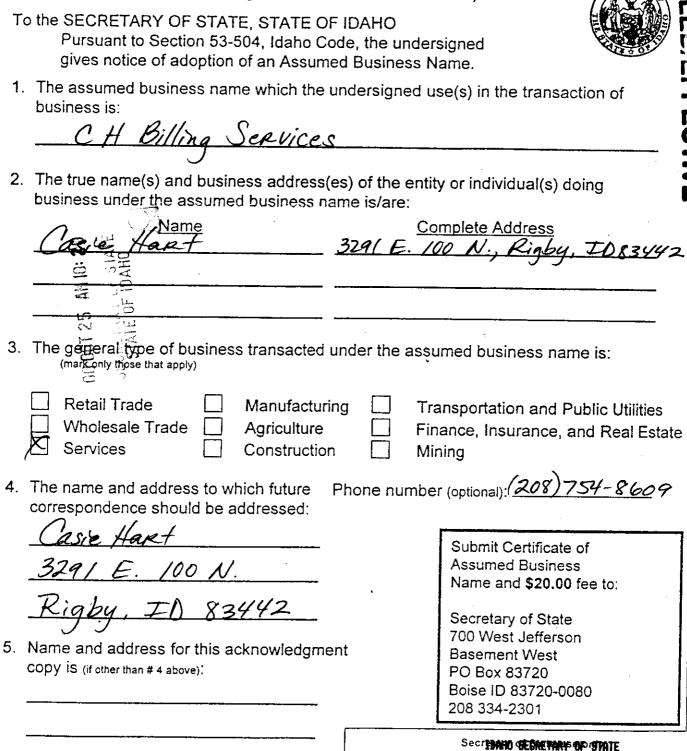
CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



Signature:

Printed Name:

Capacity: (see instruction # 8 on back of form)

10/26/2000 09:00 CK: 1665 CT: 137717 BH: 356911

1 0 20.00 = 20.00 ASSUM NAME # 2

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