

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

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

E-VISION INTERACTIVE

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

Name	Complete Address
<u>MICHAEL D. PASQUALE</u>	<u>5677 E. SARAH LOOP</u>
<u>ANDREA D. PASQUALE</u>	<u>ATHOL ID 83801-8784</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

5677 E. SARAH LOOP
ATHOL ID 83801-8784

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Michael D. Pasquale OR
Andrea Di Pasquale
Printed Name: MICHAEL D. PASQUALE
ANDREA D. PASQUALE
Capacity: PROPRIETORS

(see instruction # 8 on back of form)

SECRETARY OF STATE

07/19/2000 09:00
CK: 5189 CT: 133721 BH: 334701

1 @ 20.00 = 20.00 ASSUM NAME: # 2

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