

CERTIFICATE OF AUTHORITY **OF**

D.M. SCHAFFER CORPORATION

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that
duplicate originals of an Application of
for a Certificate of Authority to transact business in this State,
duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have
been received in this office and are found to conform to law.
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of
Authority to D.M. SCHAFFER CORPORATION
to transact business in this State under the nameD.M. SCHAFFER CORPORATION
and attach hereto a duplicate original of the Application
for such Certificate.
Dated March 05, 1990
SECRETARY OF STATE SECRETARY OF STATE Corporation Clerk

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

	F10; jumpe Code, the unde in your State, and for that		by applies for a Certificate of wing statement:
The name of the comporati	1 _{n is} PM 3 12 M	Schatter	Corporation
The name which it shall us	e in Idaho is	7. Schaffer	Corporation.
•	quired to avoid a conflict w	·	e. Must be accompanied by a
It is incorporated under th	e laws of	aware	
The date of its incorporati	on is $\frac{4-1-8}{}$	5	and the period of its duration
	re grownt		3
The address of its principal poration Trust	al office in the state or count	ry under the laws of which range is reet, w	th it is incorporated in it is incorporated in a standard, 19
	espondence should be addre		
in office is	: P.O. BOX	101, Sagle	, Idaho 83860
The street address of its pr	oposed registered office in Id	daho is 301/2	North First Street
			, and the name of its proposed
registered agent in Idaho a	t that address is	of O.M.	Schaffer.
	which it proposes to pursue		
International	Bartes and (ountertrade Con	nsulting
Merger and The names and respective	Acquisition addresses of its directors as		(are commetting)
Name	Office		Address
7. Schaffer	President	POBOX 101	, Sagle, I Rolo
stine A. Cooper	V.P. Socretary	& Treasures	, Sagle, Idalo & (Tresume asabo
0 /			
wakiki mina a mana a			
		400	(continued on reverse)

Name	Office	Address
	· · · · · · · · · · · · · · · · · · ·	
	i shall comply with the prov	visions of the Constitution and the laws of the State of
Idaho.		
11. This Application is accompa	anied by a certificate of Cor	porate Status or Existence, duly authenticated by the
proper officer of the state	te or country under the	laws of which it is incorporated.
Dated: January	7 th, 1990	
Danca:		DM SIFE Cond
9	<u></u>	(Corporation Name)
	n m	CAA PAINT
	By	Its President (please specify)
		its Fresherit vice Fresherit (pieuse specify)
	and	reasurer De
STATE OF Solato	,	Its Secretary/Assistant Secretary (please specify)
STATEOR) ss:	MARGARET B. COMSTOCK
COUNTY OF Denne	1	SEAL STATE OF IDAHO (STAL)
Margaret	& Comston	, a hotary public, do hereby certify that on
0 41	Qa	
this d	ay of fanua	, 19 70, personally appeared before
me D. M. Schaffer	+ Christine	who being by me first duly sworn, declared that (s)he
are President	M.D.	· Staller Consoration
18 the research	1 / 01	
neasurer secre	tary Christine	Cooper o V. The Sheffer Corp-
that (a) he signed the foregoing do	sumani as Plan Lat	+ Heasury of the corporation and that
the statements therein contained	are true.	of the corporation and that
	n expires October	20, 1995.
•		/
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	(AMW	eguet & (mustock
		Notary Public





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Office of Secretary of State

I, MICHAEL HARKINS, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY D. M. SCHAFFER CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE DATE SHOWN BELOW.



900265127

Michael Harkins Secretary of State

AUTHENTICATION:

12545217

DATE:

02/17/1990