CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 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: INTERSPLICE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: **Complete Address** Name 319 N 30TH ST APT J-104 INTERAVISION, INC. 0131429 BOISE ID 83702 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Wholesale Trade Agriculture Construction Mining ΚX Services 4. The name and address to which future Phone number (optional): (208) 368-9717 correspondence should be addressed: Submit Certificate of Assumed Business 319 N 30TH ST APT J-104 Name and \$20.00 fee to: BOISE ID 83702 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 12/07/1999 99:00 CK: 1848 CT: 123817 BH: 271744 Signature:

JANNE MARTIN

(see instruction # 8 on back of form)

PRES.

Printed Name

Capacity:

1 8 20.88 = 28.80 ASSUN NAME # 3

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