

State of Idaho

Department of State

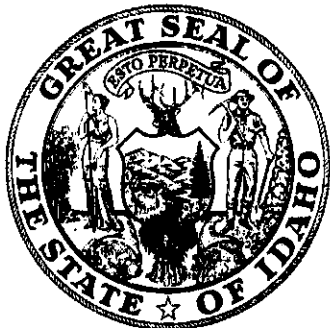
AMENDED CERTIFICATE OF AUTHORITY OF

BUSINESS CREDIT LEASING, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of LYON FINANCIAL SERVICES, INC. for an Amended 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 Amended Certificate of Authority to LYON FINANCIAL SERVICES, INC. to transact business in this State under the name LYON FINANCIAL SERVICES, INC. and attach hereto a duplicate original of the Application for such Amended Certificate.

Dated: October 28, 1991



Pete T. Cenarrusa

SECRETARY OF STATE

Lolly J. Clark

Corporation Clerk

APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

To the Secretary of State of the State of Idaho:

Pursuant to Section 30-1-118, Idaho Code, the undersigned corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement.

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1. A Certificate of Authority was issued to the corporation by your office on 19 83, authorizing it to transact business in the State of Idaho under the name of Business Credit Leasing, Inc.

2. Its corporate name has been changed to Lyon Financial Services, Inc.

(Note: If the corporation name has not been changed, insert "No change.")

3. The name which it shall use hereafter in the State of Idaho is Lyon Financial Services, Inc.

4. It desires to pursue in the transaction of business in the State of Idaho purposes other than or in addition to those set forth in its prior application for certificate of authority, as follows: No Change

(Note: If no additional purposes are proposed, insert "No change.")

Dated August 27, 1991

Lyon Financial Services, Inc. (Corporation Name)

By [Signature] Vice President Its President/Vice President (please specify) and [Signature] Secretary Its Secretary/Assistant Secretary (please specify)

STATE OF Minnesota)) ss: COUNTY OF Lyon)

I, [Signature], a notary public, do hereby certify that on this 27 day of August, 1991, personally appeared before me Adrian J. Anderson, Donald M. Miller, who being by me first duly sworn, declared that (s)he is the Secretary of Lyon Financial Services, Inc.

that (s)he signed the foregoing document as Vice President/Secretary that the statements therein contained are true.

[Signature] Notary Public [Notary Seal: Doreen E. Hummel, Notary Public - Minnesota, Lyon County, My Commission Expires 6-16-94]

State of Minnesota

SECRETARY OF STATE

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SEC. OF STATE

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Certificate of Name Change

I, Joan Anderson Grove, Secretary of State of Minnesota, do certify that the corporation listed below filed an amendment of its articles of incorporation, or, in the case of a non-Minnesota corporation, a certificate of name change, changing its name with this office on the date listed below, and that the corporation has complied with the relevant laws of Minnesota with respect to that filing.

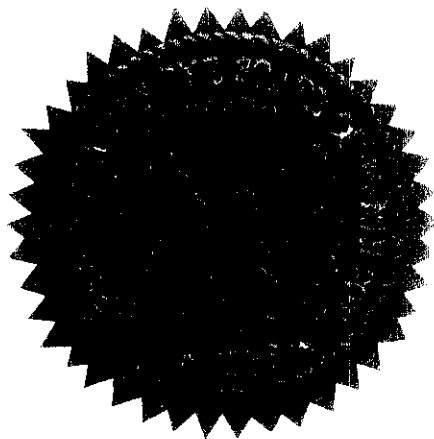
Old Name: Business Credit Leasing, Inc.

New Name: Lyon Financial Services, Inc.

State of Incorporation: MN

Date Amendment filed: 07/18/1991

This certificate has been issued on 09/26/91.



Joan Anderson Grove
Secretary of State.