

## AMENDED CERTIFICATE OF AUTHORITY OF

<b>01</b>
NATIONAL HERITAGE MANAGEMENT OF NEVADA, INC.
I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that
duplicate originals of an Application of NATIONAL HERITAGE MANAGEMENT OF
NEVADA, 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 NATIONAL HERITAGE MANAGEMENT. INC.
to transact business in this State under the name NATIONAL
HERITAGE MANAGEMENT, INC. and attach hereto a duplicate
original of the Application for such Amended Certificate.
Dated
SECRETARY OF STATE
E SECRETARIOI STATE
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

A Certificate of Authority	y was issued to the corporati	on by your office on May	14.	,
$\sim$	to transact business in the S			
4.1				e i e i e i e i e i e i e i e i e i e i
National Heritage	Management of Nevad	la. Inc.		<u></u>
Its corporate name has be	en changed to <u>Nationa</u>	Heritage Manageme	ent. Inc.	<i>V.</i>
•	•		,	1. 9
(Note: If the corporation	n name has not been chang	ed, insert "No change.")		
The name which it shall u	ise hereafter in the State of Id	laho is		
National Heritag	e Management, Inc.			
It desires to pursue in the	service corporation, add to e transaction of business in prior application for certifi	the State of Idaho purpose	es other than or	
No Change  (Note: If no additional	purposes are proposed, ins	ers "No change.")		
(Note: If no additional	6	ers "No change.") , 19 <u>87</u>		
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(Note: If no additional	9		_ President	
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	Ву		_ President	
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(Note: If no additional Dated September STATEOF TEXAS	Ву	Its_Vice Its_Assistant	rg/	
(Note: If no additional	By	Its_Vice Its_Assistant	Secretary	hat on this

of Nevada, Inc.	President	or <u>Nacionai</u>	DELILARE	Management	
	Vica	Draeident			
that he signed the foregoing of that the statements therein co	ontained are true.	rresident		of the corporation	and
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# STATE OF NEVADA DEPARTMENT OF STATE

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I, FRANKIE SUE DEL PAPA, the duly qualified and acting Secretary of State of the State of Nevada, do hereby certify that on AUGUST 25, 1987 there was filed in this office by

### NATIONAL HERITAGE MANAGEMENT OF NEVADA, INC.

a Certificate of Amendment to its Articles of Incorporation changing the corporate name to

#### NATIONAL HERITAGE MANAGEMENT, INC.

said change of name has been made in accordance with the Laws of the State of Nevada; said Certificate of Amendment being now on file and of record in this office. I further certify, that the above corporation is in good standing.



Secretary of State

Deputy

Form AC-1 (Rev. 13-86)

(O)-5086 ------