

NRD 5.16.00

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06-05-2000



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Honorable Commission... rd the attached original documents or copy thereof.

<p>1. Name of conveying party(ies):</p> <p>CVZ, Inc.</p> <p><input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation State Incorporated <u>OR</u> <input type="checkbox"/> Other</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: <u>Pacifica, Inc.</u></p> <p>Internal Address: _____</p> <p>Street Address: <u>3139 NW Industrial Street</u></p> <p>City <u>Portland</u> State <u>OR</u> ZIP <u>97210</u></p> <p><input type="checkbox"/> Individual's citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Other <u>Oregon Corporation</u></p> <p>If assignee is not domiciled in the U.S., a domestic representative designation attached: No <input type="checkbox"/> Yes <input type="checkbox"/> (Designation must be a separate document from assignment)</p> <p>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____</p> <p>Execution Date: <u>April 20, 2000</u> CERTIFIED COPY OF ARTICLES OF AMENDMENT ATTACHED.</p>	

4. Application number(s) or registration number(s):

A. Trademark Application No. (s) 76/014,862 B. Trademark Registration No. (s)

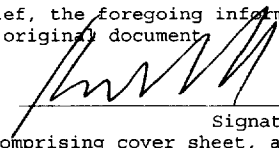
Additional numbers attached? Yes No

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p>	<p>6. Total number of trademark applications and registrations involved: <input type="checkbox"/> 1</p>
<p>Name: <u>Kevin L. Russell, Esq.</u> Address: <u>Chernoff, Vilhauer, McClung & Stenzel LLP</u> <u>1600 ODS Tower</u> <u>601 SW Second Avenue</u> <u>Portland, Oregon 97204-3157</u></p>	<p>7. Total fee (37 CFR 2.6(b)(6)) --- \$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account <input checked="" type="checkbox"/> Any deficiencies in enclosed fees authorized to be charged to deposit account</p> <p>8. Deposit Account No. <u>03-1550</u> (Attach duplicate copy of this page if paying by deposit account)</p>

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Kevin L. Russell  May 10, 2000
Name of Person Signing Signature Date

Total number of pages comprising cover sheet, attachments, and document [5]

06/02/2000 JSHABAZZ 00000060 76014862

01 FC:481 40.00 CP Do not detach this portion

Mail documents to be recorded with required cover sheet information to:

Commissioner of Patents and Trademarks
Box Assignments
Washington, DC 20231

Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, D.C. 20231, and to the Office of Management and Budget, Paperwork Reduction Project, (0651-0011), Washington, D.C. 20503.

Q:\Bonnie\wpdocs\KLR\Pacifica Recordal Letter of Name Change; May 10, 2000

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, **BILL BRADBURY**, Secretary of State of Oregon, and Custodian of the Seal
of said State, do hereby certify:

That the attached copy of the
**Articles of
Amendment**
filed on
April 20, 2000
for
CVZ, INC.

changing the name to
PACIFICA, INC.

is a true copy of the original document
that has been filed with this office.

*In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.*

BILL BRADBURY, Secretary of State



By

A handwritten signature in cursive script, appearing to read "Marilyn R. Smith".

Marilyn R. Smith

May 8, 2000

97 10



Phone: (503) 865-2200
Fax: (503) 578-4881

Secretary of State
Corporation Division
265 Capitol St. NE, Suite 151
Salem, OR 97310-1327

Articles of Amendment—Business/Professional/Nonprofit

For office use

Check the appropriate box below:

- BUSINESS/PROFESSIONAL CORPORATION
(Complete only 1, 2, 3, 4, 6, 7)
- NONPROFIT CORPORATION
(Complete only 1, 2, 3, 5, 6, 7)

FILED

APR 20 2000

OREGON
SECRETARY OF STATE

Registry Number: 566071-88

Attach Additional Sheet If Necessary
Please Type or Print Legibly in Black Ink

1) NAME OF CORPORATION PRIOR TO AMENDMENT CV2, Inc.

2) STATE THE ARTICLE NUMBER(S) AND SET FORTH THE ARTICLE(S) AS IT IS AMENDED TO READ. (Attach a separate sheet if necessary.)
Article 1: Name of the corporation: Pacifica Inc.

3) THE AMENDMENT WAS ADOPTED ON: _____
(If more than one amendment was adopted, identify the date of adoption of each amendment.)

BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Class or series of shares	Number of shares outstanding	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required. The membership vote was as follows:

Class (and) series of shares to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

6) EXECUTION

Printed Name

Billy Taylor

Signature
Billy Taylor

Title

Secretary

7) CONTACT NAME

James W. Hoffman

DAYTIME PHONE NUMBER - INCLUDING AREA CODE

541 485-2007

FEES

Make check for \$11.00
Corporation Division
NOTE: Filing fees may be paid with M&A or Money Order. Card number and expiration date should be provided on separate sheet for your information.