Capacity: /pssee

(see instruction # 8 on back of form)

D57092

	RTIFICATE OF ASSUMED (Please type or print lego the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Congives notice of adoption of an Assum	F IDAHO ode, the undersigned ed Business Name
1.	The assumed business name which the business is: Airpor + Inn	
2.	The true name(s) and business address(business under the assumed business name	es) of the entity or individual(s) doing ame is/are: <u>Complete Address</u>
	Versa L. King	5123 Airport Rd. Nampa, TD 831087
3.	The general type of business transacted (mark only those that apply) Retail Trade	ing
4.	The name and address to which future correspondence should be addressed: Versa L. King 5123 Airport Rd	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Farmers & Merchants State Bank 112 2nd Street South Nampa, ID 83651	Secretary of State use only
Signatu Printed	Name: Versa L. King	IDAHO SECRETARY OF STATE 98/96/2002 05:00 CK: 70922 CT: 158010 RH: 481075 1 0 20.00 = 20.00 assim wame # 2