CERTIFICATE OF ASSUMED BUSINESS NAME

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 wh	sich the	e undersigned	use(s) in t	he transacti	on of
	business is:				(_,		

UNIVERSITY INN BEST WESTERN

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name
Hagadone Hospitality Co. and P.O. Box 6200

Moscow Inn, Inc., Joint Venture Coeur d'Alene, ID 83816

3. The general type of business transacted under the assumed business name is:

Hotel

See categories on the reverse

4. The name and address to which correspondence should be addressed:

University Inn Best Western, P.O. Box 6200,

Coeur d'Alene, ID 83816-1937

Signed

В٧

John R. Barlow

Capacity Secretary, Hagadone Hospitality Co.

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

12/03/1997 09:00 CK: 11260 CT: 90600 BH: 60233

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