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STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

93011879 PARTNERSHIP ASSUMED NAME CERTIFICATE

The undersigned hereby certify as follows:

1. That they are all of the partners in the general partnership which conducts business in Lake County, Indiana under the name of WLS Partnership.

2. The full name of each partner in the partnership and his resident address is as follows:

Dean V. White  
909 West 126th  
Crown Point, Indiana 46307

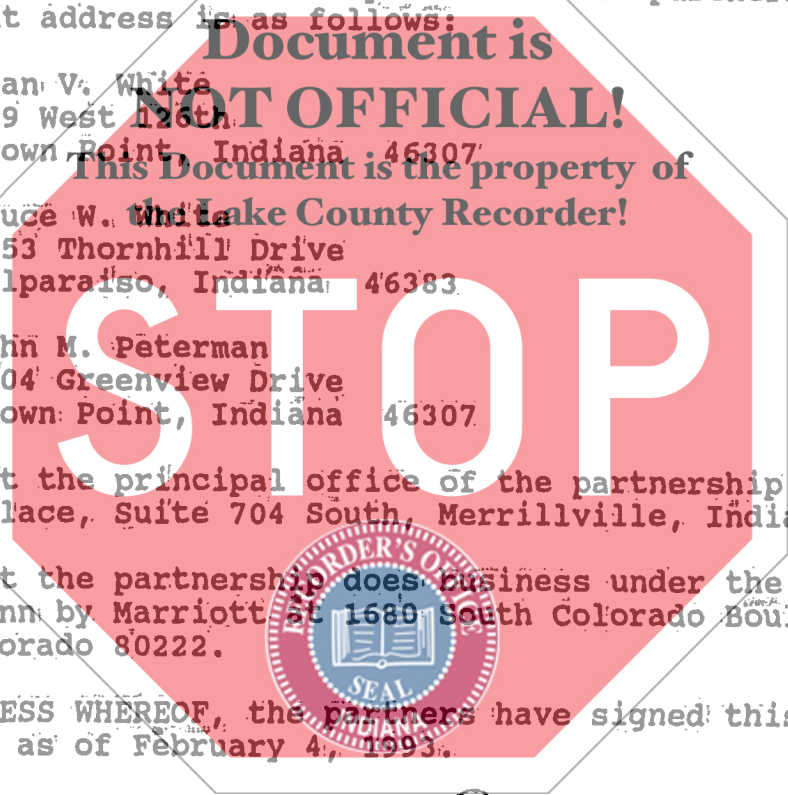
Bruce W. White  
3153 Thornhill Drive  
Valparaiso, Indiana 46383

John M. Peterman  
1004 Greenview Drive  
Crown Point, Indiana 46307

3. That the principal office of the partnership is East 80th Place, Suite 704 South, Merrillville, Indiana 46410.


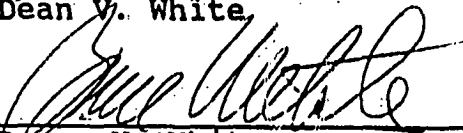
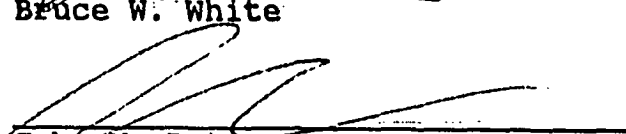
4. That the partnership does business under the name Fairfield Inn by Marriott at 1680 South Colorado Boulevard, Denver, Colorado 80222.

IN WITNESS WHEREOF, the partners have signed this certificate as of February 4, 1993.



FEB 23 9 24 AM 1993  
SAMUEL ORLICH  
RECORDER

STATE OF INDIANA / S.S. NO.  
LAKE COUNTY  
FILED FOR RECORD

  
\_\_\_\_\_  
Dean V. White  
  
\_\_\_\_\_  
Bruce W. White  
  
\_\_\_\_\_  
John M. Peterman

*200*

STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )

Before me the undersigned, a Notary Public for the above county and state personally appeared Dean V. White and acknowledged the execution of the foregoing instrument this 18th day of February 1993.

Rachael R. Lambie  
Notary Public

My Commission Expires: 5/27/94 Printed Name: Rachael R. Lambie  
Resident County: Lake

STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )

**Document is  
NOT OFFICIAL!**

~~Before me the undersigned, a Notary Public for the above county and state personally appeared Bruce W. White and acknowledged the execution of the foregoing instrument this 18th day of February 1993.~~

~~Rachael R. Lambie  
Notary Public~~

~~My Commission Expires: 5/27/94 Printed Name: Rachael R. Lambie  
Resident County: Lake~~

STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )



Before me the undersigned, a Notary Public for the above county and state personally appeared John M. Peterman and acknowledged the execution of the foregoing instrument this 11th day of February 1993.

Sharon Mustafa  
Notary Public

My Commission Expires: 10-18-95 Printed Name: Sharon Mustafa  
Resident County: Lake

This instrument prepared by Carol Ann Bowman, Attorney at Law, 1000 East 80th Place, Suite 700 North, Merrillville, Indiana 46410.

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