CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

	To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idah gives notice of adoption of an Ass	no Code, the undersigned FIDAHO
1.	The assumed business name which the uncousiness is: The Colonial House	dersigned use(s) in the transaction of
	The true name(s) and business address(es) business under the assumed business name Name Idaho Student Housing, LLC W3X7	·
	Dennis G. Austad	Idaho Falls, ID 83406
3.	The general type of business transacted und (mark only those that apply) Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	·
4.	The name and address to which future correspondence should be addressed: Idaho Student Housing, LLC Dennis G. Austad 3655 Wanda Street Idaho Falls, ID 83406	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5.	Name and address for this acknowledgmen copy is (if other than # 4 above): Zions First National Bank 401 North Capital	700 West Jefferson
Signat	Idaho Falls, ID 83402	EDONE GEGREF ORX OF STOTE 64/03/2001 09:00 CX: none CT: 112633 BH: 388818 1 2 20.90 = 20.00 ASSUM NAME 1 3

D44198

Printed Name: ____Owner

Capacity:____

(see instruction # 8 on back of form)