27	
 CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. Please type or print legibly. NOTE: See instructions on reverse before filing. The assumed business name which the undersigned use(s) in the transaction of business is: 	
2. The true name(s) and business address(es) of business under the assumed business name: Name B&T HOSPITALITY MANAGEMENT, INC C153357	
 3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: PO BOX 51298 IDAHO FALLS, ID 83405 	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgmen COPY IS (if other than # 4 above): ZIONS BANK 1235 S UTAH AVE IDAHO FALLS ID 83402 ATTN DEB Signature: Printed Name: Capacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 09/04/2008 05:00 CK: 131596999 CT: 158810 BH: 1134 1 8 25.00 = 25.00 ASSUM NAME #