CERTIFICATE OF	
ASSUMED BUSINESS	
Pursuant to Section 53-504, Idaho Code, ti	
submits for filing a certificate of Assumed E	
Please type or print legibly.	
NOTE: See instructions on reverse befo	re filing. SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the une business is:	dersigned use(s) in the transaction of
Desert View Se	wruke and Safes
2. The true name(s) and <u>business</u> address(es business under the assumed business nam Name	
-Desert view	
	Pocahello Idaho 83202
Melvin Clark	TOCARCIO JUSHO 83102
Connie Clark	
 3. The general type of business transacted un Retail Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining 	and Public Utilities Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
Desert View Service and sol	es PO Box 83720
RT 2 BOX 169-5	Boise ID 83720-0080 208 334-2301
Pocatello Idaho	208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt Phone number (optional):
	Secretary of State use only
gnature: Mulsum Clark	THOUS CODETARY OF STATE
inted Name: Melin Clark	S Ø2/23/2007 Ø5:20 CK: 7682 CT: 210868 BH: 1035146 I 25:90 = 25.00 ASSUM NAME
apacity/Title: <u>Owner guerubor</u>	TING 500
(see Instruction # 8 on back of form)	5 D108528