



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2004 DEC 10 AM 9:14

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.** STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Trace Chemical

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

Name	Complete Address
<u>Scott Willmore</u>	<u>PO Box 521 Rexburg ID 83440</u>
<u>Rex Radford</u>	<u>PO Box 521 Rexburg ID 83440</u>

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Trace Chemical  
PO Box 521  
Rexburg ID 83440

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone number (optional):

208-589-1762

Signature: Scott E Willmore  
(signature required)

Printed Name: Scott E Willmore

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

D82552

IDAHO SECRETARY OF STATE  
12/10/2004 05:00  
CK: 5522 CT: 184267 BH: 78848  
1 @ 25.00 = 25.00 ASSUM NAME # 2