

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 APR 18 AM 8:35

## Please type or print legibly. Instructions are included on back of application.

SECRE BY OF STATE

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1.	The assumed business name which the und	tersigne	d use(s) in the transaction of	
	business is:  Know Hoof	Know Har	se	
2.				
	business under the assumed business nam  Name	<b>e</b> :	Complete Address	
	Betsy L Koncerak	PO Box 519, Winchester, ID 83555-0519		
3.	The general type of business transacted un	der the a	assumed business name is:	
	Retail Trade Transportation			
	☐ Wholesale Trade ☐ Construction			
	Services Agriculture			
	Manufacturing Mining		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:		450 North 4th Street	
	Know Hoof Know Horse, Betsy L Koncerak		PO Box 83720 Boise ID 83720-0080	
	PO Box 519 Winchester, ID 83555-0519		208 334-2301	
5	Name and address for this acknowledgmen	•		
J.	COPY is (if other than # 4 above).			
	same as #4			
			Secretary of State use only	
_	nure: Etay L Koncerdh			
rinte	ed Name: Betsy L Koncerak			
apa	city/Title: Owner		TRANS CEPPETADY OF CTATE	
ignature:			IDAHO SECRETARY OF STATE  94/18/2011 95:90  CK: 3684 CT: 158818 BH: 1269551	
rinted Name:			1 8 25.00 = 25.00 ASSUM NAME W 2	
apa	city/Title:		D146933	
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