DOC ID ----> 201434000010

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/09/2014	201434000010	FICTITIOUS NAME REGISTRATION (NFO)	50.00	0.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

CHRONICLES
720 TOWNLINE ROAD 151
NORWALK, OH 44857

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted

2348453

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

CHRONICLES, LLC

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
FICTITIOUS NAME REGISTRATION	**201434000010**

Effective Date: 12/06/2014

SOLID DIMENSIONS, INC.
720 TOWNLINE ROAD 151
NORWALK, OH 44857

Expiration Date: 12/06/2019

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of December, A.D. 2014.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201434000010

Form 534A Prescribed by:
JON HUSTED
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Date Electronically Filed: 12/6/2014

Name Registration

Filing Fee: $50

CHECK ONLY ONE (1) Box

☐ Trade Name
(167-RNO)

Date of first use: _____
MM/DD/YYYY

☒ Fictitious Name
(169-NFO)

CHRONICLES, LLC
Name being Registered or Reported

SOLID DIMENSIONS, INC.
Name of the Registrant

Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.

Registrant's Entity Number (if registered with Ohio Secretary of State): 865845

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Retail sales operations

Business address:

720 TOWNLINE ROAD 151
Mailing Address

NORWALK
City

OH
State

44857
ZIP Code

DOC ID ----> 201434000010

Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.

Provide the name and address of at least one general partner:

Name	Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required
Application must be signed by the registrant or an authorized representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

SOLID DIMENSIONS, INC.
Signature

TIM PARCHER
By (if applicable)

Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.