

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 MAR 21 PM 5:00

SECRETARY OF STATE
STATE OF IDAHO**Please type or print legibly.****Instructions are included on back of application.**

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

Cones

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

NameComplete Address

Connor Drollinger

6850 west Joplin Road meridian ID 83646

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Darien Drollinger

3818 N. Bryce Canyon pl. meridian ID 83646

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Signature: [Signature]

Printed Name: Connor Drollinger

Capacity/Title: owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

D169900

IDAHO SECRETARY OF STATE
03/21/2014 05:00
CK: 1753066 CT: 172099 BH: 1416603
1 @ 25.00 = 25.00 ASSUM NAME # 2