THIS LICENSE MUST BE PUBLICLY DISPLAYED AS PROVIDED BY LAW

## STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

## RETAIL LICENSE

THIS LICENSE IS NEITHER TRANSFERABLE NOR ASSIGNABLE BEFORE POSTING READ INSTRUCTIONS BELOW

ST-1 (Rev. 08/28/18) 5000

OWNER NAME AND BUSINESS LOCATION:

TRADE NAME AND MAILING ADDRESS

LICENSE MUST BE RETURNED FOR ALL CHANGES AND/OR CLOSE OF BUSINESS PIEDMONT SPRINGS INTERIORS INC 3103 S HIGHWAY 17 MURRELLS INLET SC 29576-7629

LICENSE NUMBER

102680573

PIEDMONT SPRINGS INTERIORS INC 5530 NATURAL SPRINGS RD BLACKSBURG SC 29702-9704



INDUSTRY
TYPE 453998

EFFECT 01-Jan-2019

Letter ID: L0009285548

THIS LICENSE IS VALID FOR ABOVE LOCATION ONLY. CHANGE OF LOCATION OR OWNERSHIP REQUIRES NEW LICENSE.

EACH PLACE OF BUSINESS MUST BE LICENSED SEPARATELY

File # 102680573

SID# 8764761

Horry

Unincorporated

1026

This retail license is issued pursuant to Article 5, Chapter 36, Title 12, Code of Laws of South Carolina, 1976, as amended. The retail license is valid so long as the person to whom it is issued continues in the same business at the same location as shown on license, unless revoked by the Department of Revenue for cause. It is presumed that a retailer is not continuing in the same business and must surrender the retail sales license if the retailer has no retail sales for twenty-four consecutive months. To allow the license to remain valid, the retailer may submit an affidavit to the department swearing that the business is continuing. If the business is closed, moved or sold, the licensee must complete the questions listed below and return this license to the SC Department of Revenue, PO Box 125, Columbia, SC 29214.

IF THERE ARE ANY QUESTIONS REGARDING THIS LICENSE, CONTACT THIS DIVISION AT 1-844-898-8542	
OUT OF BUSINESS OR CHA	ANGE OF OWNERSHIP (Also complete C-278)
DATE OF CLOSING OR SALE	
NEW FIRM NAME	
NEW OWNER'S NAME OR NAMES	
CHANGE OF ADDRESS AN	ID/OR TRADE NAME (Also complete SC-8822)
IF BUSINESS LOCATION CHANGES, RETURN THIS LICENSE IF BUSINESS IS MOVED OR THE TRADE NAME IS CHANGEI	E AND COMPLETE CHANGE OF ADDRESS/BUSINESS LOCATION FORM SC-8822. D, GIVE THE:
NEW TRADE NAME	DATE BUSINESS MOVED
NEW LOCATION ADDRESS	The state of the s
MAILING ADDRESS	NEW TELEPHONE NUMBER



## **INSTRUCTIONS**

This is your new license. Please fold on the above perf marks and display in a conspicuous place.

If you have any questions concerning this license, please call the SC Department of Revenue 1-844-898-8542.

If the business is closed, moved, or sold, please complete the form above and return it with the original license to:

South Carolina Department of Revenue Registration Section P.O. Box 125, Columbia, SC 29214-0400



\*JP:853E:00214S:010IN:0A#:Y1364089368J:0000085164\*