REGISTRATION CERTIFICATE Date ID Issued IDENTIFICATION NUMBER **Business Start Date** 04-Nov-2015 03-336783-00-3 01-Oct-2015 **Business Location Business End Date** 2300 CALLE DE REAI City and State Zip Code ALBUQUERQUE, NM 87104 Taxpayer Name Taxpayer Type **THOMAS MAES** PROPRIETOR Firm Name Eiling Frequency T MILTON MAESTAS Seasonal Mailing Address 2300 CALLE DE REAL City and State Zip Code 1912 ALBUQUERQUE, NM 87104

Form Revised 02/2003

This Registration Certificate is issued pursuant to Section 7-1-12 NMSA 1978 for Gross Receipts, County Gross Receipts, Municipal Gross Receipts, Compensating and Withholding Taxes. This copy must be displayed conspicuously in the place of business. Any purchaser of the registrant's business is subject to certain requirements under Section 7-1-61 NMSA 1978.

Division Director Tax Administration

By Ron L. Scott

Any inquiries concerning your Idenfication Number should be addressed to the Audit & Compliance Division, P.O. Box 630, Santa Fe, New Mexico 87504-0630

THIS CERTIFICATE IS NOT TRANSFERABLE

STATE OF NEW MEXICO TAXATION AND REVENUE DEPARTMENT REGISTRATION CERTIFICATE

Date ID Issued	IDENTIFICATION NUMBER	Business Start Date	
04-Nov-2015	03-336783-00-3	01-Oct-2015	
Business Location 2300 CALLE DE REA	AL/ATTO	Business End Date	
City and State ALBUQUERQUE, N	(6)(息)(6)	Zip Code 87104	
Taxpayer Name THOMAS MAESTAS		Taxpayer Type PROPRIETOR	
Firm Name T MILTON MAESTA	SP W	Seasonal	
Mailing Address 2300 CALLE DE REAL			
City and State ALBUQUERQUE, NN	9.1912.	Zip Code 87104	
Form Revised 02/2003	THIS CER	THIS CERTIFICATE IS NOT TRA	

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