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New Jersey Division of Taxation

Sales Tax

Resale Certificate

Check applicable box: Single-Purchase Certificate

The seller must collect Sales Tax on the sale of taxable property or services unless the purchaser gives them a fully completed exemption certificate.

Do not mail this form to the Division of Taxation

Seller				
Name				
Address				
	Street	City	State	ZIP Code
Purchaser		86-1896837		
•	payer Identification Nu	mber		
Atabey H Name*	Holdings LLC			
Name*		As registered with the New Jers	ey Division of Taxation	
26 Bis Address*	ssett Pl	Metuchen	NJ	08840
Address	Street	City	State	ZIP Code
T (D)	Miscellaneous			
Type of Busines	S [^]			
The purchaser cer	rtifies that:			
(1) They hold	a valid Certificate of Auth	ority to collect New Jersey Sales and	d Use Tax.	
(2) They are p	principally engaged in the	sale of (indicate nature of property of	or service sold):	
Sale of	f Miscellaneous Goods			
(3) The prope	erty or services being pure	hased are described as follows:		
Clothin	g and Accessories			
(4) The prope	erty described above is b	eing purchased for (check all boxes t	that apply):	
	sale in its present form.			
		as a component part of a product by	•	
		taxable service on personal property of the service in conjunction with the		property being serviced or will later be
(5) The servi	ces described above are	being purchased (check the box that	applies):	
By seller who will either collect tax or will resell services.				
To be performed on personal property held for sale.				

I, the undersigned purchaser, have read and complied with the instructions and rules promulgated pursuant to the New Jersey Sales and Use Tax Act with respect to the use of the resale certificate, and it is my belief that the seller named herein is not required to collect the Sales or Use Tax on the transaction or transactions covered by this certificate. The undersigned purchaser hereby swears under the penalties for perjury and false swearing that all of the information shown in this certificate is true.

Print Name Eve	lyn Torres	euSigned by:
Authorized Sign		AS17FC3F4E46) (Owner, Partner, Corporate Officer)
Title Manager		Date

*Required