

Montrose Marketing, Inc dba Fairmont Furniture & Flooring

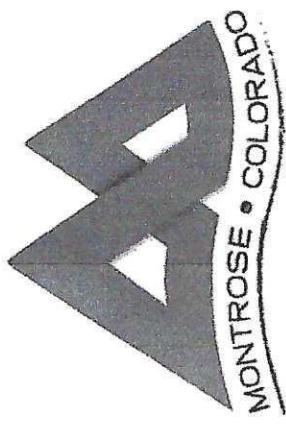
# The City of Montrose, Colorado

433 S. First Street, PO Box 790, Montrose, CO 81402-0790

## SALES & USE TAX LICENSE

This License is Granted To:  
Montrose Marketing, Inc  
1836 East Main Street  
Montrose, CO 81401

License Number:  
**000725**  
Business Type  
Furniture & Carpet  
Expiration  
12/31/2026



Date Issued  
11/10/2025  
**2026**

Each Licensee shall be required to ascertain and at all times comply with all laws and regulations applicable to such licensed business. The Licensee shown hereon is hereby authorized to conduct business in The City of Montrose.

**THIS LICENSE MUST BE POSTED AND IS NON-TRANSFERABLE**

DR 0140 (02/16/11)  
DEPARTMENT OF REVENUE  
DENVER CO 80261-0013

Must collect taxes for:  
**SALES TAX LICENSE**

THIS LICENSE MUST BE POSTED AT THE FOLLOWING LOCATION  
IN A CONSPICUOUS PLACE: FLAIRMONT FURNITURE CO  
1836 E MAIN ST MONTROSE CO 81401-3840

STATE COLORADO COUNTY MONTROSE PUBLIC SAFETY

USE ACCOUNT NUMBER for all references	LIABILITY INFORMATION			ISSUE DATE			LICENSE VALID TO DECEMBER 31		
	county	city	industry type	liability date	month	day		year	
00411827-0000	21	0011	004	C	010120	Nov	19	25	2027

**THIS LICENSE IS NOT TRANSFERABLE**



MONTROSE MARKETING INC  
PO BOX 749  
MONTROSE CO 81402-0749

*Heidi Humphrey*  
Executive Director  
Department of Revenue

# SALES TAX EXEMPTION CERTIFICATE MULTI - JURISDICTION

See reverse side for instructions.

Issued to (Seller)	Address		
<b>CERTIFY THAT</b>	Name of Firm (Buyer) <u>Montrose Marketing, Inc. dba Flairmont Furniture + Flooring</u> Street Address or Post Office Box Number <u>P.O. Box 749</u> City <u>Montrose</u> State <u>CO.</u> ZIP Code <u>81402</u>		
<b>QUALIFIES AS</b> (Check each applicable item)	<input type="checkbox"/> WHOLESALER <input checked="" type="checkbox"/> RETAILER <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> LESSOR* (See note on reverse side) <input type="checkbox"/> CHARITABLE OR RELIGIOUS <input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHER (Specify) _____		
1) and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or lease by us in the normal course of our business which is <u>retail flooring and home furnishings</u> or 2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is: <input type="checkbox"/> CHARITABLE OR RELIGIOUS <input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHERWISE EXEMPT BY STATUTE (SPECIFY) _____			
City or State	State Registration or ID Number	City or State	State Registration or ID Number
<u>Colorado</u>	<u>004-11827</u>	<u>Montrose</u>	<u>725</u>
City or State	State Registration or ID Number	City or State	State Registration or ID Number
<u>Montrose</u>	<u>725</u>	<u>Montrose</u>	<u>725</u>
City or State	State Registration or ID Number	City or State	State Registration or ID Number
<u>Montrose</u>	<u>725</u>	<u>Montrose</u>	<u>725</u>
<b>If the list of states and cities is more than six (6), attach a list to this certificate.</b>			
I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax we will pay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.			
General description of products to be purchased from the seller <u>Furniture</u>			
<b>Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.</b>			
Authorized Signature (Owner, Partner or Corporate Officer) <u>Tom DeFulvio</u>		Title <u>President</u>	Date <u>4/8/26</u>