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 INCTADOTIONS BELOW

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

OWNER NAME AND BUSINESS LOCATION:

LICENSE MUST BE RETURNED FOR ALL CHANGES AND/OR CLOSE OF BUSINESS

FREDERICK JOSEPH VIRGONA VIRGONA, FREDERICK 23 STONEY POINT DR BLUFFTON SC 29910-9305

LICENSE NUMBER

007293118

TRAVELING TRADER TRAVELING TRADER PO BOX 1334 BLUFFTON SC 29910-1334

INDUSTRY TYPE

454111 01-Jan-2013

TRADE NAME AND MAILING ADDRESS

Letter ID: L0007525507 EACH PLACE OF BUSINESS MUST BE LICENSED SEPARATELY

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

File # 0072\$3118

SID# 2653993 Beaufort

Bluffton

2074

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.

THE LICE	NCE CONTACT THIS DIVISION AT 1-844-898-8542
IF THERE ARE ANY QUESTIONS REGARDING THIS LICENSE, CONTACT THIS DIVISION AT 1-844-898-8542	
OUT OF BUSINESS OR CHANGE OF O	WNERSHIP (Also complete C-278)
DATE OF CLOSING OR SALE	
NEW FIRM NAME	
NEW OWNER'S NAME OR NAMES	
CHANGE OF ADDRESS AND/OR TRADE NAME (Also complete SC-8822)	
IF BUSINESS LOCATION CHANGES, RETURN THIS LICENSE AND COMPLE IF BUSINESS IS MOVED OR THE TRADE NAME IS CHANGED, GIVE THE:	ETE CHANGE OF ADDRESS/BUSINESS LOCATION FORM SC-6622.
	DATE BUSINESS MOVED
NEW TRADE NAME	BUSINESS MUNICIPAL LIMITS
NEW LOCATION ADDRESS	
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:373E:00094S:010IN:0A#:Y1656384627J:0000027371*

