

**UNIFORM SALES & USE TAX CERTIFICATE—MULTIJURISDICTION**

The below-listed states have indicated that this form of certificate is acceptable, subject to the notes on pages 2 - 4. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: Caring Transitions

Address: 4755 Lake Forest Drive, STE 100, Cincinnati OH 45242

I certify that: \_\_\_\_\_ is engaged as a registered

Name of Firm (Buyer): <u>KiChiSaga Trading Co. LLC</u>	Wholesaler _____
Address <u>12007 256th Street</u>	Retailer _____
<u>Chisago City MN 55013</u>	Manufacturer _____
	Seller (California) _____
	Lessor (see notes on pages 2 - 4) _____
	Other (Specify) <u>Reseller</u>

and is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product or service<sup>1</sup> to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: Reseller - ecommerce

General description of tangible property or taxable services to be purchased from the seller: Used items from estate sales

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit or ID Number of Purchaser
AL <sup>2</sup>	_____	NE <sup>14</sup>	_____
AR	_____	NV	_____
CA <sup>3</sup>	_____	NJ	_____
CO <sup>1</sup>	_____	NM <sup>1,15</sup>	_____
DC <sup>4</sup>	_____	ND	_____
GA <sup>5</sup>	_____	OK <sup>16</sup>	_____
HI <sup>1,6</sup>	_____	RI <sup>17</sup>	_____
ID	_____	SC <sup>1</sup>	_____
IL <sup>1,7</sup>	_____	SD <sup>18</sup>	_____
IA	_____	TN	_____
KS <sup>8</sup>	_____	TX <sup>19</sup>	_____
ME <sup>9</sup>	_____	UT	_____
MD <sup>10</sup>	_____	VT <sup>1</sup>	_____
MI <sup>11</sup>	_____	WA <sup>20</sup>	_____
MN <sup>12</sup>	<u>1693518</u>	WI <sup>17</sup>	_____
MO <sup>13</sup>	_____		

I further certify that if any property or service 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 directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature:   
 (Owner, Partner or Corporate Officer)

Title: Owner

Date: 08/19/2024