

RETAIL LICENSE

STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE  
RETAIL LICENSE



THIS LICENSE MUST  
BE PUBLICLY  
DISPLAYED AS  
PROVIDED BY LAW

THIS LICENSE IS NEITHER  
TRANSFERABLE NOR  
ASSIGNABLE  
BEFORE POSTING READ  
INSTRUCTIONS BELOW

ST-1  
(Rev. 9/242010)  
5000

OWNER NAME BUSINESS LOCATION: GULF COAST SHELTER INC  
2224 STANTON RD  
DAPHNE, AL 36526

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

TRREG 3138027008



GULF COAST SHELTER INC  
1490 SE GIDEON ST  
PORTLAND OR 97202

LICENSE NUMBER	
CO.	SERIAL
099494700	
MULTIPLE NUMBER	
INDUSTRY TYPE	444190
EFFECT DATE	05/01/2012

INDUSTRY  
TYPE ▶  
EFFECT  
DATE ▶

TRADE NAME AND MAILING ADDRESS

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

EACH PLACE OF BUSINESS MUST BE LICENSED SEPARATELY

File # 09949470-0 SID # 2348770-000

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 S.C. Department of Revenue, PO Box 125, Columbia, SC 29214.

IF THERE ARE ANY QUESTIONS REGARDING THIS LICENSE, CONTACT THIS DIVISION AT (803) 896-1350

OUT OF BUSINESS OR CHANGE OF OWNERSHIP

DATE OF CLOSING OR SALE \_\_\_\_\_

NEW FIRM NAME \_\_\_\_\_

NEW OWNER'S NAME OR NAMES \_\_\_\_\_

CHANGE OF ADDRESS AND/OR TRADE NAME

IF BUSINESS LOCATION CHANGES, RETURN THIS LICENSE AND COMPLETE CHANGE OF ADDRESS/BUSINESS LOCATION FORM SC8822.  
IF BUSINESS IS MOVED OR THE TRADE NAME IS CHANGED, GIVE THE:

NEW TRADE NAME \_\_\_\_\_

DATE BUSINESS MOVED \_\_\_\_\_

NEW LOCATION ADDRESS \_\_\_\_\_

BUSINESS MUNICIPAL LIMITS \_\_\_\_\_

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 (803) 896-1350.

If the business is closed, moved, or sold, please complete the form above and return it with the original license to:

SC Department of Revenue, Registration Unit  
301 Gervais Street, PO Box 125, Columbia, SC 29214