

TEXAS SALES AND USE TAX PERMIT

This permit is not transferable, and this side must be prominently displayed in your place of business

Retailers: A seller may NOT accept a copy resale certificate. A certificate is TAXPAYER NAME, BUSINE	You must obtain a new permit if there is a chan ownership, location, or business location nan	
NURANI SYNDICATE LLC		SALES AND USE TAX
VALENTINA COUTURE	Taxpayer number 3-20873-6030-4	
4444 CYPRESS CREEK PKWY S	TX 77068-3413	Location number
HARRIS COUNTY ALICS: 448120 Women's Clothir	a Stores	First business date of location 01/01/2023
	LLOWING LOCAL SALES TAX AUTHORITIES:	
CITY: HOUSTON	EFF: 01/01/2023	10)/
RANSIT: HOUSTON MTA	EFF: 01/01/2023	/ () + Days
		Glenn Hegar Comptroller of Public Accounts

You may need to collect sales and/or use tax for other local taxing authorities depending on your type of business.

For additional information, see "Collecting Local Sales and Use Tax" section on the back of this document.

If you have any questions regarding sales tax, visit our website at www.comptroller.texas.gov or call us at 1-800-252-5555.

Detach here and prominently display your permit only. Retain the portion below for your records.

Is the Information Printed on this Permit Correct?

The information printed on your permit is public information. It must be accurate and current. If there is an error, make corrections on the form below. Enter the correct information for incorrect items only. Detach the form and mail it to:

Comptroller of Public Accounts 111 E. 17th Street Austin, TX 78774-0100

More helpful information about your permit is on the back of this document.

Texas Sales and Use Tax Permit Corrections Form

Taxpayer name shown on the permit NURANI SYNDICATE LLC			If you need to make changes to
Taxpayer number shown on the permit 32087360304	Location number shown on the permit 0000 1		your local sales tax authorities or to the NAICS code printed
Correct business location name	•		on your permit, see information on the back of this form.
Correct business location (no P.O. Box or directions accept	ed)		-
•			
City	State	ZIP code	County
•			
Correct taxpayer name		Da	ytime phone (Area code and number)
•		ž ed	
Correct mailing address			
•			
City	State	ZIP code	Federal Employer Identification Number
If you are no longer in business , enter the date of your last business transaction.			
sign Taxpayer or authorized agent here		Date	E PEXAS
			000000268