





Sample Certificate

STATE OF NEW JERSEY		DEPARTMENT OF TREASURY/ DIVISION OF REVENUE	
BUSINESS REGISTRATION CERTIFICATE		PO BOX 28866 TRENTON NJ 08646-0282	
TAXPAYER NAME:	TRADE NAME:		
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:		
ADDRESS:	ISSUANCE DATE:		
EFFECTIVE DATE:	 Acting Director		
FORM-BRC(08-01)	This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.		