

"NAME OF BUSINESS"

Mailing address:
1234 2ND ST
ALBUQUERQUE NM
87102

2024

SSN: ***-***-0000;
Letter ID: L000000000

THIS CERTIFICATE IS NOT TRANSFERABLE

STATE OF NEW MEXICO TAXATION AND REVENUE DEPARTMENT
REGISTRATION CERTIFICATE

Legal Name: NAME OF BUSINESS ENTERED HERE
Entity Type: (Ex. sole proprietor, LLC, Corp.)



THE ABOVE REFERENCED TAXPAYER IS REGISTERED FOR THE FOLLOWING TAX ACCOUNTS:

Business Tax ID	Doing Business As Name			
00-000000-00-0	NAME OF BUSINESS			
Program Name	Tax ID	Start Date	End Date	Filing Status
Gross Receipts	0000000000000-	01-Jan-2007		Monthly
Business Tax ID	Location Addresses Under GRT Account			
000000000000-GRT	PHYSICAL ADDRESS OF EACH BUSINESS			

FOR EXAMPLE PURPOSES ONLY

