TAXATION DIVISION PO BOX 3666 JEFFERSON CITY, MO 65105-3666



Missonii DEPARTMENT OF REVENUE

Telephone: 573-751-9268 Fax: 573-522-1265

E-mail: taxclearance@dor.mo.gov

PAPA MURPHYS PIZZA 15800 BOONES FERRY RD STE C301 LAKE OSWEGO, OR 97035-3494 DATE: 02/17/2021

VALID THROUGH: 05/18/2021

CERTIFICATE OF NO TAX DUE

MISSOURI ID: 19985720 Notice Number 2019015949

To Whom It May Concern: The Department of Revenue, State of Missouri, certifies the above listed taxpayer has filed all required returns and paid all sales or withholding tax due, including penalties and interest, and does not owe any sales and withholding tax, as of February 16, 2021. This review does not include returns that are not required to be filed as of this date or that have been filed but not yet processed by the Department.

This statement only applies to sales and withholding tax due and is not to be construed as limiting the authority of the Director of Revenue to assess, or pursue collection of liabilities resulting from final litigation, default in payment of any installment agreement entered into with the Director of Revenue, any successor liability that may become due in the future, or audits or reviews of the taxpayer's records as provided by law.

THIS CERTIFICATE REMAINS VALID FOR 90 DAYS FROM THE ISSUANCE DATE.

TAXATION DIVISION



Expiration date: 10/31/2020

Business License Renewal

220 SE Green Street Lee's Summit, MO 64063 Phone 816.969.1220 / Fax 816.969.1221 / www.cityofls.net

PAPA MURPHYS PIZZA Licensing 8700 MONROVIA ST STE 310 LENEXA, KS 66215

PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Please Update your Information. If there are changes to the information provided, please draw a line through and correct.

Physical Business Address:

443 SW WARD RD LEES SUMMIT, MO 64081

Business E-Mail Address:: JEREMIAHBUCK@GMAIL.COM Legal Name of Business: (if different than DBA):

Type of Organization:

PAPAS PARTNERS LLC

Business Classification:

900 Restaurants/Pizzeria/Fast Foods

paul hirt (a papas partners, com Renew on-line communications email address: (If you would like to renew on-line, you must provide an email above. This email address could be different than the Business Email Address. This email address is the person that is responsible for Business Licenses/Renewals at your place of business- Further Instructions included)

Business Phone Numbers:

Primary	Cell	Fax
8165242744	9132446273	5036992896
	and the state of the	

Contact Information:

Primary	Secondary	Emergency
JEREMIAH BUCK, Address:8700 MONROVIA ST STE 310, Phone:(913) 244-6273	PAUL HIRT, Phone:(816) 728-8285	
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Please provide a general description or scope of Pizza SNOP	work for your business:	
DOING ANY RETAIL SALES (provide copy of cur	rent no sales tax due letter) - 19	985720
or businesses physically located in Lee's Sum	mit this section <u>MUST</u> be compl	eted*
Has your Physical Address changed over the last	year? Y or (If yes complete Zo	ning Approval Form)
Is business located in a Lee's Summit commerci		
Do you have an intrusion alarm? Yor (circle)		
Total Building Square Footage - 1600		
Employee Headcount for this location:		
Full Time: 1		
Part Time: 12		
Temporary:		
IF DOING ANY RETAIL SALES (provide copy of current	t no sales tax due letter) - 19985720	
IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S website at www.cityofls.net .	SUMMIT, PLEASE SUBMIT A NEW ZO	ONING FORM. Zoning forms located on
FEE CALCULATION (please check those that apply):		
X \$50 Business License Fee (base fee	2)	
Penalty for delinquent license is 5%	per month not to exceed 25% (is de	linquent 60 days after expiration)
Total fee		
I declare under penalty of perjury that to the best of r	nv knowledge and belief the statemo	ents made herein are true and correct.
	1)11	7 17 7
X Signature of Owner(s) or Corporation Agent/Owner	X	
The filing of this application or the granting of a busin the provisions of the zoning code, and is further subje specific occupations and businesses. Payment by Chec	ness license neither confirms nor appo ct to all applicable federal, state and	roves the use of land as regulated under local laws and regulations which apply to
FOR OFFICE USE ONLY License Effective from/ to	Fee Remitted	\$ License #