Expiration date: 09/30/2024



## **Business License Renewal**

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

Johnson Fitness and Wellness Licensing 1600 Landmark Dr Cottage Grove, WI 53527

#### 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: 1744 NW CHIPMAN RD LEES SUMMIT, MO 64081 Business E-Mail Address::logan.axne@johnsonfit.com

Legal Name of Business: (if different than DBA):

2ndWind Exercise Equipment Inc D.B.A Johnson Fitness and

Wellness

Type of Organization:

Wholesale Trade

Please provide your NAIC Code:

Business Phone Numbers :

Primary		Cell	Fax	
5155730641	**		7.5	

### Contact Information:

Primary	Secondary	Emergency
Alan Egan, Address:1600 Landmark Dr, Phone:(515) 573-0641	Secondary	Alan Egan, Address:1600 Landmark Dr, Phone:(515) 573-0641

(Continued on back page)

Please provide a general description or scope of work for your business:	, 
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 194422	262
*For businesses physically located in Lee's Summit this section <u>MUST</u> be completed*	
Has your Physical Address changed over the last year? Y or N (If yes complete Zoning of Is business located in a Lee's Summit Commercial area or Residential? (circle)  Do you have an intrusion alarm? Y or N (circle)  Total Building Square Footage -	Approval Form)
Employee Headcount for this location: Full Time: 2 Part Time: Temporary:	
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 19442262  IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SUBMIT A NEW ZONING website at <a href="https://www.cityofls.net">www.cityofls.net</a> .	G FORM. Zoning forms located on
FEE CALCULATION (please check those that apply):	*
X \$50 Business License Fee (base fee)	
Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent	ent 60 days after expiration)
Total fee	
I declare under penalty of periury that to the best of my knowledge and belief the statements of X  Signature of Owner(s) or Corporation Agent/Owner  Title  The filing of this application or the granting of a business license neither confirms nor approves the provisions of the zoning code, and is further subject to all applicable federal, state and local	$\frac{8}{9}$ $\frac{9}{202}$ Date
specific occupations and businesses. Payment by Check – make check payable to City of Lee's S  FOR OFFICE USE ONLY  License Effective from/ to/ Fee Remitted \$	ummit.



# *Missouri* Department of Revenue

Telephone: 573-751-9268 Fax: 573-522-1265 E-mail: taxclearance@dor.mo.gov

2ND WIND EXERCISE EQUIPMENT INC 1600 LANDMARK DR COTTAGE GROVE, WI 53527-8967 DATE: 05/10/2023

VALID THROUGH: 08/08/2023

ST LOUIS

### **CERTIFICATE OF NO TAX DUE**

MISSOURI ID: 19442262 Notice Number 2039978635

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 May 9, 2023. 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**