

06/15/04

Taxpayer Identification# 200-405-811/000

Dear Business Representative:

Congratulations! You are now registered with the New Jersey Division of Revenue.

Use the Taxpayer Identification Number listed above on all correspondence with the Divisions of Revenue and Taxation, as well as with the Department of Labor (if the business is subject to unemployment withholdings). Your tax returns and payments will be filed under this number, and you will be able to access information about your account by referencing it.

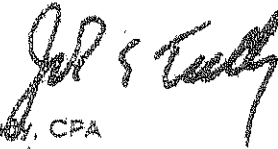
Additionally, please note that State law (Public Law 2001, c.134) requires all contractors and subcontractors with State agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.

We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

If you have any questions or require more information, feel free to call our Registration Hotline at (609) 292-1730.

I wish you continued success in your business endeavors.

Sincerely,



John E. Tuohy, CPA
Acting Director

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE
FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS

DEPARTMENT OF TREASURY /
DIVISION OF REVENUE
PO BOX 262
TRENTON, N J 08646-0252

TAXPAYER NAME:

PECHTER'S OF SOUTHERN NEW JERSEY, LLC

TRADE NAME:

TAXPAYER IDENTIFICATION#:

200-405-811/000

SEQUENCE NUMBER:

1067077

ADDRESS:

2 SURREY LANE
CINNAMINSON NJ 08077

ISSUANCE DATE:

06/15/04

EFFECTIVE DATE:

11/07/03

FORM-BRC(08-01)

Acting Director


This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

STATEMENT OF AUTHORITY

BID SUBMITTED FOR:

COMPANY: Pechter's of Southern NJ, LLC
ADDRESS: 2 SURREY LANE - PO BOX 2069
CINNAMINSON, NJ 08077

BID BY: James Fisher Gen. MGR. P.O.A.
(PLEASE PRINT OR TYPE NAME)

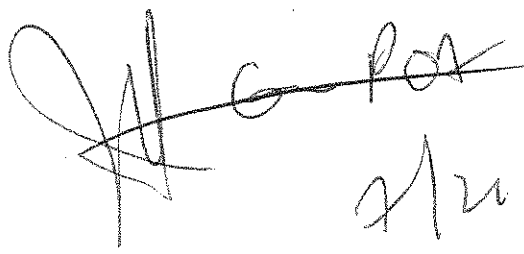
SIGNATURE: 
(BID MUST BE SIGNED TO BE VALID)

TITLE: Gen. MGR P.O.A. DATE: 7/21/10

TELEPHONE: 856-786-8000 FAX: 856-786-0089

TAXPAYER IDENTIFICATION NUMBER: 20-0405811

**BY MY SIGNATURE I HEREBY CERTIFY THAT I
AM FAMILIAR WITH THE REQUIREMENTS OF THIS BID AND THAT I
HAVE THE AUTHORITY TO SUBMIT THIS BID.**

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7/21/10

VENDOR INFORMATION SHEET

In order to assure that all future correspondence is directed to the correct address, assure proper ordering, and to expedite future payments, the following information must be provided with this bid:

Name of Business: Pechter's of Southern NJ, LLC

Correspondence Address, including zip code:

2 SURREY LANE
PO BOX 2069
CINNAMINSON, NJ 08077

Purchase Order Address, including zip code:

SAME AS ABOVE

Payment Address, including zip code:

SAME AS ABOVE

Telephone Number: 856-786-8000

Facsimile Number: 856-786-0089