

**AUTHORIZED DEALER/RESELLER FORM**

**(\*REQUIRED FIELD)**

\* **FOR CONTRACTOR/MANUFACTURER:** Paragon Furniture, LP

SOLICIATION NUMBER: **5400004933** CONTRACT NUMBER: **4400007177**

CONTRACTOR'S/MANUFACTURER'S REPRESENTATIVE: Matt Coyne

E:Mail: mcoyne@paragoninc.com Phone: 817.633.3242

Cell: 817.908.5567

\***AUTHORIZED DEALER/RESELLER:** Contrax Group, LLC

\*FEIN (Federal Employer ID Number) 26-3476027

\*South Carolina Vendor Registration Number 7000143895

Contract Reference: (leave blank)

**\*ADDRESS/MAILING INFORMATION:**

\*Street Address (no PO Box ): Corp. Office: 690 NE 23<sup>rd</sup> Ave. /SC address: 159 Wellborn St.

\*City/State/Zip: Corp Office: Gainesville, FL 32609 / SC Address: Greenville, SC 29601

\*Purchase Orders To: Corp Office; Attn: Josh Rollins  
(if different from above)

\*Payments To: Corp Office; Attn: Cindy Carameros  
(if different from above)

**CONTACT INFORMATION:**

\*WEBSITE: www.contrax.com

\*PHONE: 800.699.7516 TOLL FREE: 800.699.7516

FAX: 877.373.0622

**\*CONTACTS:**

\*Name: Jason Zalewski Name: \_\_\_\_\_

\*Title: Regional Sales Manager Title: \_\_\_\_\_

\*Email: jzalewski@contrax.com Email: \_\_\_\_\_

\*Phone: 800.699.7516 Phone: \_\_\_\_\_

The Authorized Dealer/Reseller will represent the Manufacturer to State agencies and local political subdivisions within the State of South Carolina and will abide by all terms and conditions as agreed to by the Contractor/Manufacturer.