



**Alabama Licensing Board for General  
Contractors**

445 Dexter Ave, Suite 3060 Montgomery, AL 36104  
Phone: (334) 272-5030  
Fax: (334) 395-5336



**LICENSE VERIFICATION REQUEST AND AUTHORIZATION:**

Name: **RETAIL FIXTURE SOLUTIONS INC** License #: **S-50098**

I authorize the Alabama Licensing Board for General Contractors to release information in regards to the status of my license.

**ALABAMA BOARD VERIFICATION:**

LICENSE #: **S-50098** Expiration Date: **5/31/2025**

Specialty: **SUBCONTRACTOR: INSTALLATION OF SHELVING SYSTEMS, CONVEYOR SYSTEMS, AND DOCKING EQUIPMENT**

Board Signature: \_\_\_\_\_ Date: **04/25/2026**  
**Tiffany Loveless**  
**Executive Director**