

**Pennsylvania Public Utility Commission**  
**PO Box 3265**  
**Harrisburg, PA 17105-3265**  
**(717) 787-1227**

## **Application for Motor Common Carrier of Property**

Please complete all parts of the following application. For questions, please call the Commission at (717) 787-3834.

1. **Legal Name of Applicant** (Individual, Partnership, LP, LLP, Corporation, or LLC)

J Rimer's LLC

2. **Trade Name** (if using a fictitious trade name, it must be registered with the Dept. of State)

SafeGuard Moving Company

**Fictitious name and Registration number** (if applicable)

SafeGuard moving company /4049277

3. **Physical Address** (do not use PO Box)

10733 Pelle cir  
Street Address

Philadelphia, PA 19154  
City, State and Zip Code

215-432-1662                      ph. lade lph. a  
Telephone Number                      County

4. **Mailing Address** (if different from Physical Address)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State and Zip Code

5. **Attorney** (if applicable)

\_\_\_\_\_  
Attorney's Name & Telephone Number for this Filing

\_\_\_\_\_  
Attorney's Address

**RECEIVED**

**JAN 18 2012**

**PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU**

6. Does applicant currently hold or has ever held PA PUC authority?

Yes  No (circle one)

If yes, PUC NO. A- 8913881

7. What type of commodity do you intend to transport?

Office Items

8. Are you one of the following? If yes, check below.

Individual

Partnership

9. Are you a business entity registered with the PA Department of State?

If YES, please check below the type of business that applies to this Application and provide the Entity ID Number given to you by the PA Department of State:

Limited Partnership

Corporation Bureau Entity ID Number

Limited Liability Partnership

Corporation Bureau Entity ID Number

Limited Liability Company

4016148  
Corporation Bureau Entity ID Number

Corporation – For Profit

Corporation Bureau Entity ID Number

Corporation – Nonprofit

Corporation Bureau Entity ID Number

Fictitious Name (if applicable)

\_\_\_\_\_

If NO, contact the PA Department of State and apply according to how you will do business in PA:

PA Corporations (Profit or Non-Profit)

- File for Articles of Incorporation

Foreign Corporations

- File for a Certificate of Authority

- PA Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies - File for an Application of Registration
- Fictitious Name Registration - File **only** if Trade Name will be different than the business name you register with the Department of State

**10. Attachment Checklist**

- Individual:  Certified Check, money order, or check from attorney  
 Copy of Current Safety Rating (if available)
- Partnership:  Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)
- Limited Partnership:  Corporation Bureau Entity Number as entered above in #9  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)
- Limited Liability Partnership:  Corporation Bureau Entity Number as entered above in #9  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)
- Limited Liability Company:  Corporation Bureau Entity Number as entered above in #9  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Members and Title of each Member (even if only one member)  
 Copy of Current Safety Rating (if available)
- Corporation – For Profit:  Corporation Bureau Entity Number as entered above in #9  
 Certified Check, money order, or check from attorney  
 List of ALL Corporate Officers and Titles, name of each Shareholder and distribution of shares  
 Copy of Current Safety Rating (if available)
- Corporation – Non-Profit:  Corporation Bureau Entity Number as entered above in #9  
 Certified Check, money order, or check from attorney  
 List of ALL Corporate Officers and Titles and those serving on Board of Directors  
 Copy of Current Safety Rating (if available)

**11. Certification**

Applicant certifies that it is not now engaged in intrastate transportation of property for compensation between points in Pennsylvania without Pennsylvania Public Utility Commission authorization and will not engage in any transportation not previously authorized by the Pennsylvania Public Utility Commission unless and until such authorization is obtained.

Applicant further certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance and that it may be subject to civil penalties, suspension or cancellation of the Certificate for failure to comply with Commission requirements.

Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Property; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the Certificate.

**You must sign the following Verification of Application.**

**Verification of Application**

The verification of the application must be completed by the applicant appearing on Line 1 of the application by the named individual, all partners (if a partnership, LP, or LLP), a member (if LLC), or by any officer (if a corporation).

I/we hereby state that the statements made in this application are true and correct to the best of my/our knowledge and belief.

The undersigned understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 Relating to Unsworn Falsification to Authorities.

Jo Ann Rimer's  
(Print Name)  
[Signature]  
(Signature) 1/13/12  
(Date)

J Rimeris LLC list of members:

Joann Rimeris

10733 Pelle Cir

Philadelphia, PA 19154

Title: Owner

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
CORPORATION BUREAU  
401 NORTH STREET, ROOM 206  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722  
WWW.CORPORATIONS.STATE.PA.US/CORP

J RIMERIS LLC

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE CORPORATION BUREAU, PLEASE VISIT OUR WEB SITE LOCATED AT WWW.CORPORATIONS.STATE.PA.US/CORP OR PLEASE CALL OUR MAIN INFORMATION TELEPHONE NUMBER (717)787-1057. FOR ADDITIONAL INFORMATION REGARDING BUSINESS AND / OR UCC FILINGS, PLEASE VISIT OUR ONLINE "SEARCHABLE DATABASE" LOCATED ON OUR WEB SITE.

DEPARTMENT OF STATE  
CORPORATION BUREAU  
401 NORTH STREET, ROOM 206  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722  
WWW.CORPORATIONS.STATE.PA.US/CORP

ENTITY NUMBER: 4016148

ENCLOSURE

FILED

HAPPY TO SERVE YOU FOR YOUR BUSINESS

FILED  
CORPORATION BUREAU  
HARRISBURG, PA

FOR ADDITIONAL INFORMATION REGARDING BUSINESS AND / OR UCC FILINGS, PLEASE VISIT OUR ONLINE "SEARCHABLE DATABASE" LOCATED ON OUR WEB SITE.

INCFILE.COM, LLC  
134 Vintage Park Boulevard, Suite A : Unit 50  
Houston, TX 77070

ENTITY NUMBER: 4016148

PENNSYLVANIA DEPARTMENT OF STATE  
 CORPORATION BUREAU

Entity Number

Certificate of Organization  
 Domestic Limited Liability Company  
 (15 Pa.C.S. § 8913)

Name

INCFIL.COM, LLC

Address

134 Vintage Park Blvd, Ste A, Unit 50

City

HOUSTON

State

TX

Zip Code

77070

Document will be returned to the name and address you enter to the left.



Commonwealth of Pennsylvania  
 CERTIFICATE OF ORGANIZATION 3 Page(s)



T1107042110

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (*designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation*):

J RIMERIS LLC

INCFIL.COM

Address

2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and Street City State Zip County  
 10733 PELLE CIR PHILADELPHIA PA 19154 PHILADELPHIA

(b) Name of Commercial Registered Office Provider County  
 c/o:

3. The name and address, including street and number, if any, of each organizer is (*all organizers must sign on page 2*):

Name Address  
 MARSHA SIHA - 134 Vintage Park Blvd, Ste A, Unit 50 HOUSTON TX 77070

in compliance with 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned hereby certifies that:

I, the name of the limited liability company, hereby certify that I am the organizer of the limited liability company.  
 PA DEPT. OF STATE

MAR 10 2011

2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and Street City State Zip County  
 10733 PELLE CIR PHILADELPHIA PA 19154 PHILADELPHIA

(b) Name of Commercial Registered Office Provider County





COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
CORPORATION BUREAU  
401 NORTH STREET, ROOM 206  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722  
[WWW.CORPORATIONS.STATE.PA.US/CORP](http://WWW.CORPORATIONS.STATE.PA.US/CORP)

Safeguard Moving Company

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE CORPORATION BUREAU, PLEASE VISIT OUR WEB SITE LOCATED AT [WWW.CORPORATIONS.STATE.PA.US/CORP](http://WWW.CORPORATIONS.STATE.PA.US/CORP) OR PLEASE CALL OUR MAIN INFORMATION TELEPHONE NUMBER (717)787-1057. FOR ADDITIONAL INFORMATION REGARDING BUSINESS AND / OR UCC FILINGS, PLEASE VISIT OUR ONLINE "SEARCHABLE DATABASE" LOCATED ON OUR WEB SITE.

DEPT. OF STATE  
CORPORATION BUREAU  
401 NORTH STREET, ROOM 206  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722  
REPUBLICAN LEADERSHIP CENTER

ENTITY NUMBER: 4049277

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MAY 11 2005  
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J RIMERIS LLC  
10733 PELLE CIR  
Philadelphia, PA 19154

ENTITY NUMBER: 4049277

PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU

Application for Registration of Fictitious Name  
54 Pa.C.S. § 311

Name: Rimeris LLC  
Address: 10733 Pelle Cir  
City: Philadelphia State: PA Zip Code: 19154

Document will be returned to the name and address you enter to the left.

Commonwealth of Pennsylvania  
FICTITIOUS NAME 2 Page(s)



Fee: \$70

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

1. The fictitious name is: Safeguard Moving Company

2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is: Local, residential moving company

3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):  
10733 Pelle Cir, Philadelphia, PA 19154 Philadelphia  
Number and street City State Zip County

4. The name and address, including number and street, if any, of each individual interested in the business is:  
Name: Jane Rimeris Number and Street: 10733 Pelle Cir Philadelphia, PA  
City: \_\_\_\_\_ State: \_\_\_\_\_

PA DEPT. OF STATE  
AUG-1-1-2011

5. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):  
10733 Pelle Cir Philadelphia, PA 19154  
Number and street City State Zip County

6. The name and address, including number and street, if any, of each individual interested in the business is:  
Name: \_\_\_\_\_ Number and Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_

5. Each entity, other than an individual, interested in such business is (are):

<u>Rimer's LLC</u>	<u>Limite Liability company</u>	<u>PA</u>
Name	Form of Organization	Organizing Jurisdiction
<u>10733 Pette cir, Philadelphia, PA 19154</u>		
Principal Office Address		
<u>10733 Pette cir, Philadelphia, PA 19154</u>		
PA Registered Office, if any		
Name	Form of Organization	Organizing Jurisdiction
Principal Office Address		
PA Registered Office, if any		

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then-existing parties to the registration, is (are):

<u>[Signature]</u>	<u>[Name]</u>	<u>[Title]</u>
Individual Signature	Name	Title

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

9<sup>th</sup> day of August, 2011.

<u>[Signature]</u>	<u>[Signature]</u>
Individual Signature	Individual Signature
<u>[Signature]</u>	<u>[Signature]</u>
Individual Signature	Individual Signature
<u>Rimer's LLC</u>	<u>[Signature]</u>
Entity Name	Signature
<u>Owner</u>	<u>[Signature]</u>
Title	Signature

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

9<sup>th</sup> day of August, 2011.

[Signature]

Individual Signature

**CERTIFIED MAIL™**

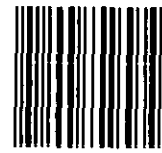
**Rob Rimeris  
10733 Pelle Cir  
Philadelphia, PA 19154**



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REQUESTED**

**RETURN RECEIPT  
REQUESTED**