

Application for Motor Common Carrier of Property

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE TO OPERATE AS A COMMERCIAL CARRIER OF PROPERTY FOR COMPENSATION BETWEEN POINTS IN PENNSYLVANIA.

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

MGO Transporting Inc.

- If you are an individual who has not formed any type of corporate entity, you should enter your name **as it will appear on your insurance documents**.
- If you are filing for a partnership, but **not a limited liability partnership**, the names of all partners must be entered on this line. Those names should be entered **as they will appear on your insurance documents**. This includes husbands and wives filing jointly.
- If you are filing for a corporate entity (corporation, limited liability company, or limited liability partnership), **even if you are the sole shareholder member**, you must enter the name **exactly as it appears on the registration papers from the Corporation Bureau of the Pennsylvania Department of State**.

2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

This is any name which you will be operating under which differs from the **LEGAL NAME OF APPLICANT**. A **TRADE NAME** is considered a **FICTITIOUS NAME** if the identity of the applicant cannot be readily determined. *EXAMPLE: John Doe is the applicant and wants to use the name "Johnboy Trucking" as his trade name. People cannot readily determine that John Doe is the actual operator; therefore, the name is fictitious and must be registered as such. Trade names such as "John Doe Trucking" or "J. Doe Trucking" are not considered fictitious and would not have to be registered.*

3. **Do you currently hold PA PUC Authority?** NO **Previous Authority?** NO

If yes, at PUC No. A- _____

4. **Are you a business entity registered with the PA Department of State?** NO
If No, you must first register (see checklist)

If Yes, provide your PA Corporation Bureau Entity ID Number 3961220
(see checklist and indicate type of business entity registered)

5. **Physical Address** (do not use post office box)

820 Tenth Avenue
Street Address

York, PA 17402
City, State and Zip Code

717-870-6612 Telephone Number York County

The address entered here should reflect the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment.

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

Street Address

City, State and Zip Code

This is the address to which the Commission will send all official documents issued by the Commission. If left blank, it will be assumed that the **MAILING ADDRESS** is the same as the **PHYSICAL ADDRESS**.

7. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address

An attorney's name should only be entered if an attorney is filing the application for a client and the application is being sent under the attorney's cover letter.

8. **Do you hold interstate operating authority?**

No Yes, at No. 904297 (in process)

9. **What type of commodities do you intend to transport?**

Regulated freight from points in PA to points in PA

MARTINS PERMIT

10. **Certification:**

Applicant certifies that it is not now engaged in unauthorized intrastate transportation for compensation between points in Pennsylvania and will not engage in said transportation unless and until authorization is received from the Pennsylvania Public Utility Commission.

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.

Verification of Application

I/We hereby state that the statement(s) made in this application is/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.

Ostiel Guerra-Morales
(Print Name)
Ostiel Guerra - Morales 2/25/15
(Signature) (Date)

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, a member (if a limited liability company), or by the President or Secretary (if a corporation).

02/25/2015 11:18 FAX

RECEIVED 02/25/2015 11:25AM 7177332844

MARTINS PERMIT 004

From: Postal Connections York

717 718 9010

02/25/2015 11:26

#891 P.001

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

MGO TRANSPORTING INC

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.

ENTITY NUMBER: 3961220

FILE COPY

Kibinda, Valerio
820 E 10th Avenue
York, PA 17402

Articles of Incorporation-For Profit

Entity #: 3961220
Date Filed: 06/11/2010
Basil L. Merenda, Acting Secretary
Acting Secretary of the Commonwealth

ST, PAO4B

From: pao4b@state.pa.us
Sent: Friday, June 11, 2010 3:23 PM
To: ST, PAO4B
Subject: PAO4B New Registration

294259

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU
Articles of Incorporation-For Profit

Business-stock (\$ 1300) Management (\$ 2703)
Business-nonstock (\$ 2102) Professional (\$ 2903)
Business-statutory close (\$ 2303) Insurance (\$ 3101)
Cooperative (\$ 7102)

Commonwealth of Pennsylvania
ARTICLES OF INCORPORATION 3 Page(s)



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

Name
VALERIO KIBINDA
Address
820 E 10th Avenue
Address

City State Zip
York PA 17402

Email:
kibinda@men.com

Fee: \$125

In compliance with the requirements of the applicable provisions (relating to corporation and unincorporated associations), the undersigned, desiring to incorporate a corporation for profit, hereby that:

- 1. The name of the corporation (corporate designator required, i.e., "corporation", "incorporated", "limited" "company" or any abbreviation. "Professional corporation" or "P.C. ");

MGO TRANSPORTING INC

- 2. The (a) address of this corporation's current registered office in this Commonwealth (post office alone, is not acceptable) or (b) name of its commercial registered office provider and the count venue is:

(a) Number and Street City State Zip County
820 E 10th Avenue York PA 17402 67

CC \$125

(b) Name of Commercial Registered Office County

- 3. The corporation is incorporated under the provisions of the Business Corporation Law of 1988.
- 4. The aggregate number of shares authorized:

6/14/2010



05/14/2010 05:42 8668920683

ENT SOLUTIONS LLC

PAGE 01/01

Domestic Corporation-Limited Partnership-Limited Liability Company Signature Form In... Page (2 of 2)

**PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU
Domestic Signature Form**

Document must be completed and mailed to the address listed below.

Department of State
Corporation Bureau
P.O. Box 8722
Harrisburg, PA 17105-8722
(717) 787-1057

- 1. The enterprise structure is:
Corporation
- 2. The enterprise legal name is:
MGO TRANSPORTING INC
- 3. The enterprise's fictitious name is:

IN TESTIMONY WHEREOF, the undersigned have caused this application to be executed this
11 day of JUNE, 2010.

Individual Signature of OSBEL GUERRA-
MORALES

Individual Signature of LISSET GUERRA

0425920100511

To avoid any delay or rejection, signature form(s) should be received within 7-10 days
of the registration submission date.

PA DEPT. OF STATE

JUN 14 2010

Articles of Incorporation-For Profit

5. The name and address, including number and street, if any, of each incorporator (*all incorporators must sign below*):

Name	Address(es)
OSBEL GUERRA-MORALES	820 E 10th AvenueYorkPA17402
LISSET GUERRA	820 E 10th AvenueYorkPA17404

6. The specified effective date, if any:

01 01 2010
Month Day Year hour, if any

7. Additional provisions of the articles, if any, attach an 8 1/2 x 11 sheet.

8. *Statutory close corporation only:* Neither the corporation nor any shareholder shall make an offering of any of its shares of any class that would constitute a "public offering" within the meaning of the Securities Act of 1933 (15 U.S.C. 77a et seq.)

9. *Cooperative corporations only: Complete and strike out inapplicable term:*

The common bond of membership among its members/shareholders is:

IN TESTIMONY WHEREOF, the incorporator(s) has/have signed these Articles of Incorporation to be signed by a duly authorized officer thereof this _____ day of

Signature

Signature
O425920100611



MGO Transporting LLC
820 Tenth Ave
York, PA 17402

Osbel Guerra-Morales, President and 50% share holder.
Lisset Guerra, Secretary and 50% share holder.