

BROTHERS MOVERS LLC

WE MAKE EVERY MOVE AS THOUGH WE'RE
MOVING OUR OWN MOM

215-322-3177 610-265-3911 215-464-2232

brothersmovers@verizon.net www.brothersmover.com

264 Surrey Rd. Southampton, PA 18966

Entity NO.: 3035876 (see enclosed)

Owner/CEO
Laurie Hurwitz White
264 Surrey Rd.
Southampton, PA 18966

COO
Donald White
264 Surrey Rd.
Southampton, PA 18966

RECEIVED
2015 MAY 26 AM 11:13
PA P.U.C.
SECRETARY'S BUREAU

ENCLOSED PLEASE FIND APPLICATION FOR:
MOTOR CARRIER OF HOUSEHOLD GOODS IN USE
MOTOR CARRIER OF PROPERTY.
CERTIFICATE OF ORGANIZATION LLC

PLEASE LET ME KNOW IF ANY OTHER INFORMATION IS
NEEDED.

REGARDS
LAURIE WHITE

Please visit us at www.yp.com www.bucksalive.com www.brothersmover.com and the
BBB for all up to date reviews and credentials. DOT 805039 MC 488778

NOV 14 2001

Microfilm Number _____

Filed with the Department of State on _____

Entity Number 3035876

Kim Fitzgerald
Secretary of the Commonwealth

CERTIFICATE OF ORGANIZATION-DOMESTIC LIMITED LIABILITY COMPANY

DSCB-15-8913 (Rev 95)

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 state(s) that:

1. The name of the limited liability company is:

BROTHER'S MOVERS, LLC

2. The address of this limited liability company's initial registered office in this Commonwealth is:

2749 Axe Factory Road
Philadelphia, PA 19152 County of Philadelphia

3. The effective date of filing shall be January 1, 2002.

4. The name and address of the organizer is:

Laurie White
2749 Axe Factory Road
Philadelphia, PA 19152

5. A member's interest in the company is to be evidenced by a certificate of membership interest.

6. The duration of the limited liability company's existence shall be perpetual.

Date: October 11, 2001

Laurie White
Laurie White

Application for Motor Common Carrier or Motor Contract Carrier of Household Goods in Use.

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE (FOR COMMON CARRIERS) OR PERMIT (FOR CONTRACT CARRIERS) TO OPERATE AS A COMMERCIAL CARRIER OF HOUSEHOLD GOODS IN USE.

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

BROTHERS MOVERS LLC

- 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)

BROTHERS MOVERS LLC

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 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 register (see checklist on how to register) **YES**

If YES, provide your PA Corporation Bureau Entity ID Number 3035876
(see checklist and indicate type of business entity registered)

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

204 SUMNER RD

Street Address

SOUTHAMPTON, PA 18966

City, State and Zip Code

215-322-3177

Telephone Number

BUCKS

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. **Does applicant hold interstate operating authority?**

No Yes, at No. 488778 NOT 805039

9. **Describe the service area proposed by this application.**

(Use the space below or attach additional sheet if space provided is not sufficient).

BUCKS COUNTY, PA
MONTGOMERY COUNTY, PA
CHESTER COUNTY, PA
DELAWARE COUNTY, PA
BERKS COUNTY, PA

Examples:

- To transport as a common carrier, household goods in use between points in Mercer County.

- To transport as a contract carrier for the XYZ Company, household goods in use, from points in Elk County to points in PA.

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 and Motor Contract Carriers of Household Goods in Use; 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.

LAURIE HURWITZ WHITE

(Print Name)

Laurie Hurwitz - White

(Signature)

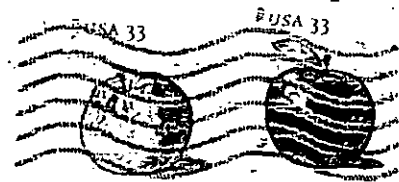
5/20/15
(Date)

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).

Brothers Movers LLC
264 Surrey Rd
Southampton, PA 18966

PHILADELPHIA PA 190

21 MAY 2015 PM 9 L



USA 33

USA 33



Secretary, PA Public Utility Commission
400 North St, 2nd floor
Harrisburg, PA 17120

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