

 **SCOPELITIS**  
GARVIN LIGHT HANSON & FEARY

10 West Market Street  
Suite 1500  
Indianapolis, IN 46204

*The full service transportation law firm*

www.scopelitis.com  
Main (317) 637-1777  
Fax (317) 687-2414

ANDREW K. LIGHT  
alight@scopelitis.com

October 6, 2015

**VIA FEDERAL EXPRESS**

Pennsylvania Public Utility Commission  
Bureau of Transportation and Safety  
400 North Street  
Harrisburg, PA 17120

Re: K.L. Breeden & Sons, LLC  
Pennsylvania Intrastate Authority

RECEIVED

OCT 06 2015

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

RECEIVED  
BUREAU OF  
TECHNICAL UTILITY SERVICES  
2015 OCT -7 PM 1:35

To Whom It May Concern:

This Firm represents K.L. Breeden & Sons, LLC, an interstate motor carrier intending to transport intrastate freight in Pennsylvania. Enclosed for filing are the following documents required to be filed in order to obtain its intrastate motor carrier authority:

1. The original and one copy of the Application for Motor Common Carrier of Property;
2. A check in the amount of \$100.00 made payable to Commonwealth of Pennsylvania to cover the required application filing fee;
3. A list of the members having membership interest in K.L. Breeden & Sons, LLC; and,
4. The motor carrier's insurance declaration pages for auto liability insurance policy #CA 495-40-77 and cargo insurance policy #QT-660-8527P373-TLC-15.

Please return to me in the enclosed self-addressed, stamped envelope a file-stamped copy of the documents evidencing receipt of the application. Should you have any questions regarding the application, please feel free to contact my paralegal, Sue Madden, or me at the above telephone number.

Indianapolis ■ Chicago ■ Washington, D.C. ■ Los Angeles ■ Chattanooga  
Detroit ■ Spokane ■ Dallas/Fort Worth ■ Milwaukee ■ Philadelphia/Mt. Ephraim

SERVICES OUTSIDE CALIFORNIA AND MICHIGAN PROVIDED BY SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, PROFESSIONAL CORPORATION  
SERVICES IN MICHIGAN PROVIDED BY SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, PROFESSIONAL LIMITED LIABILITY COMPANY  
SERVICES IN CALIFORNIA PROVIDED BY SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, LIMITED LIABILITY PARTNERSHIP

Page 2  
October 6, 2015  
Pennsylvania Public Utility Commission

Thank you for your prompt attention to processing of the attached Application.

Very truly yours,



Andrew K. Light

AKL/smm  
Enclosures

cc: Mr. Robert David, via e-mail (w/enclosures)

\\Users\smadden\WPDOCS\K. L. Breeden & Sons, LLC\PA IntraState Submittal Ltr.docx

RECEIVED

OCT 06 2015

Revised 7/9/15

Secretary  
Pennsylvania Public Utility Commission  
400 North Street, Second Floor  
Harrisburg, PA 17120  
(717) 772-7777  
[www.puc.pa.gov](http://www.puc.pa.gov)

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

### 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)

K.L. Breeden & Sons, 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)

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** 6302019  
(see checklist and indicate type of business entity registered)



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.

K.L. Breeden & Sons, LLC

(Print Name)

David Breeden

(Signature)

9-22-15

(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).

**Attachment to Pennsylvania Intrastate Authority Application**

**K.L. Breeden & Sons, LLC  
MEMBER LIST**

- 1. Wayne Breeden**  
Title: Member  
104 High Street  
Terrell, TX 75160
  
- 2. David Breeden**  
Title: Member  
104 High Street  
Terrell, TX 75160

**RECEIVED**

OCT 06 2015

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS  
401 NORTH STREET, ROOM 206  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722  
WWW.CORPORATIONS.PA.GOV

**RECEIVED**

OCT. 06 2015

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

Andrew K. Light  
10 West Market Street Suite 1500  
INDIANAPOLIS IN 46204

K.L. Breeden & Sons, LLC

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

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE BUREAU, PLEASE VISIT OUR WEBSITE LOCATED WWW.CORPORATIONS.STATE.PA.US/Search/CorpSearch 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 WEBSITE.

ENTITY NUMBER : 6302019

Entity# : 6302019  
Date Filed : 09/24/2015  
Pedro A. Cortés  
Secretary of the Commonwealth

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:  
Andrew K. Light/Scopellits, Garvln, Light, Hanson & Feary  
Name  
10 W. Market Street, Sulte 1500  
Address  
Indianapolis IN 46204  
City State Zip Code  
 Return document by email to: alight@scopellits.com

Foreign Registration Statement

DSCB:15-412



TML150930JD1674

Read all instructions prior to completing. This form may be .

Fee: \$250

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 412 (relating to foreign registration statement), the undersigned foreign association hereby states that:

1. The type of association is (check only one):

- Business Corporation       Limited Partnership       Business Trust  
 Nonprofit Corporation       Limited Liability (General) Partnership       Professional Association  
 Limited Liability Company       Limited Liability Limited Partnership

2. The full and proper name of the foreign association as registered in its jurisdiction of formation is:

K.L. Breeden & Sons, LLC

2A. If the name in 2 does not contain a required designator or if the name in 2 is not available for use in the Commonwealth, the alternate name under which the association is registering in this Commonwealth is:

A resolution of the governors adopting the name in 2A for use in registering to do business in this Commonwealth must be attached.

3. The jurisdiction of formation is: Texas

4. The street and mailing address of the association's principal office.

104 W. High Street      Terrell      TX      75160  
Number and street      City      State      Zip

4A. The street and mailing address of the office, if any, required to be maintained by the law of the association's jurisdiction of formation in that jurisdiction:

104 W. High Street      Terrell      TX      75160  
Number and street      City      State      Zip

PA DEPT. OF STATE  
SEP 24 2015

DSCB:15-412 - 2

5. The (a) address of the association's proposed registered office in this Commonwealth or (b) name of its Commercial Registered Office Provider and the county of venue is:

Complete part (a) OR (b) – not both:

(a) 500 S. Muddy Creek Road Denver PA 17517 Lancaster  
Number and street City State Zip County

OR

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

6. Check one of the following:

- The association may not have series.  
 The association may have one or more series.

7. Effective date of registration of foreign association (check, and if appropriate complete, one of the following):

- The Foreign Registration Statement shall be effective upon filing in the Department of State.  
 The Foreign Registration Statement shall be effective on: \_\_\_\_\_ at \_\_\_\_\_  
Date (MM/DD/YYYY) Hour (if any)

8. To be completed by Limited Liability Companies only. Check, and if appropriate complete, one of the following:

The association is a limited liability company which is not organized to render any of the below professional service(s).

The association is a restricted professional limited liability company organized to render one or more of the following professional service(s): (If this box is checked, one or more of the fields below must be checked.)

Chiropractic       Dentistry       Law       Medicine and surgery  
 Optometry       Osteopathic medicine and surgery       Podiatric medicine       Public accounting  
 Psychology       Veterinary medicine

IN TESTIMONY WHEREOF, the undersigned association has caused this Foreign Registration Statement to be signed by a duly authorized representative thereof this 22 day of September, 20 15.

K.L. Breeden & Sons, LLC

Name of Association

David Breeden  
Signature

LLC Manager

Title

**1 From**  
Date 10/10/15 Sender's FedEx Account Number 046221311  
Sender's Name ANNIE KESSEL Phone 517 6271777  
Company SEAGRAM LTD.  
Address 10 W MARKET ST Dept./Floor/Suite/Room  
City INDIAN State IN ZIP 46204

**2 Your Internal Billing Reference** DC0233.2

**3 To**  
Recipient's Name KWIKWIP TRANSPORTATION Phone  
Company PENNSYLVANIA PVC  
Recipient's Address 400 N DRUM STREET Dept./Floor/Suite/Room  
We cannot deliver to P.O. boxes or P.O. ZIP codes.  
Address  
To request a package be held at a specific FedEx location, print FedEx address here.  
City HARRISBURG State PA ZIP 17120

**4a Express Package Service**

**FedEx Priority Overnight** **5**  **FedEx Standard Overnight** **6**  **FedEx First Overnight**  
Next business morning. Saturday delivery not available. Packages up to 150 lbs. Earliest next business morning delivery to select locations. Saturday Delivery NOT available.  
 **FedEx 2Day** **20**  **FedEx Express Saver**  
Second business day. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. Saturday Delivery NOT available. FedEx Envelope rate not available. Minimum charge: One-pound rate. \* To most locations.

**4b Express Freight Service**

**FedEx 1Day Freight\*** **7**  **FedEx 2Day Freight** **8**  **FedEx 3Day Freight**  
Next business day. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected. Second business day. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. Third business day. Saturday Delivery NOT available. \*\* To most locations.

\* Call for Confirmation.

**5 Packaging**

**FedEx Envelope\*** **2**  **FedEx Pak\*** **3**  **FedEx Box** **4**  **FedEx Tube** **1**  **Other**  
\* Declared value less \$500. Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak.

**6 Special Handling**

**SATURDAY Delivery** **3**  **HOLD Weekday at FedEx Location** **1**  **HOLD Saturday at FedEx Location** **31**  
Not available for FedEx Standard Overnight, FedEx First Overnight, FedEx Express Saver, or FedEx 3Day Freight. Include FedEx address in Section 3. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.  
Does this shipment contain dangerous goods? One box must be checked.  
 **No** **4**  **Yes** **As per attached Shipper's Declaration.**  **Yes** **Shipper's Declaration not required.** **6**  **Dry Ice** **Dry Ice, 9 UN 1845** **kg**  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging.  **Cargo Aircraft Only**

**7 Payment Bill to:**

Enter FedEx Acct. No. or Credit Card No. below. **Obtain Recip. Acct. No.**  
 **1** **Sender Acct. No. in Section 1 will be billed.** **2**  **Recipient** **3**  **Third Party** **4**  **Credit Card** **5**  **Cash/Check**

Total Packages 1 Total Weight                     

\*Our liability is limited to \$100 unless you declare a higher value. See the current FedEx Service Guide for details. Credit Card Acct.

**8 Residential Delivery Signature Options**

If you require a signature, check Direct or Indirect.  
 **No Signature Required** **10**  **Direct Signature** **10**  **Indirect Signature**  
Someone at recipient's address may sign for delivery. Fee applies. If no one is available at recipient's address, someone at a neighboring address may sign for delivery. Fee applies.

