

PO Box 3265
Harrisburg, PA 17105-3265
(717) 787-3834 or FAX (717) 787-5961

RECEIVED
BUREAU OF
TRANSPORTATION SAFETY
2001 OCT -9 AM 11:44

Application for Motor Common Carrier of Property

Please complete all parts of the following application. Incomplete applications will be returned. All questions may be directed to the Bureau of Transportation & Safety at (717) 787-3834.

1. G-FORCE COURIER COMPANY
Full Name of Applicant (Individual, Partnership or Corporation)

2. _____
Trade Name if Any

The trade name, if fictitious, HAS NOT been registered with the
(Has or has not)

Secretary of the Commonwealth on N/A. Attach a date
(Date)
stamped copy of the registration form.

1312 E. CLIVEDEN ST.

PHILADELPHIA PA 19119 (215) 924-4548
Physical Address (Street, City, County and Zip Code) Telephone Number (Required)

4. _____
Mailing Address if Different from Physical Address

5. _____
Attorney's Name & Telephone Number for this Filing
(Do not supply Attorney's name if you want all correspondence & notice of process mailed directly to you.)

Attorney's Address

6. Applicant DOES NOT hold interstate operating authority at docket
(Does or does not)
number N/A.

7. Applicant DOES NOT have a current safety rating issued by the US
(Does or does not)
DOT, PA PUC or other state regulatory agency. (Attach Copy)

DOCKETED
OCT 09 2001

[Handwritten signature]

*25
BAPD - Ferme
Cargo - form H
Prop Cont*

A- 00118324

8. Approximate number of commercial vehicles to be operated in Pennsylvania:
Owned _____ Leased _____.

9. Check **one** that applies to this application:

Individual

Partnership (Attach a copy of a Partnership Agreement and list the names and addresses of ALL partners below.)

(Attach a separate sheet if space provided is not sufficient.)

Corporation Organized under the laws of the state of PENNSYLVANIA
qualified to do business in Pennsylvania by registering with the Secretary
of the Commonwealth on 5-23-01.
(Date)

Attach a date-stamped copy of the Application for Certificate of Incorporation or
Certificate of Authority. Include a list of corporate officers with titles, names of
shareholders and number of shares held, and addresses.

10. Attachment Checklist:

For Corporations Only:

Date-stamped copy of Application for Certificate of Incorporation or
Certificate of Authority.

List of corporate officers/titles and distribution of shares.

*Nathaniel Bruce
100% Stock & Pres*

For Partnerships Only:

Copy of Partnership Agreement.

Garrett Bruce, Sec.

For ALL Applicants:

Fictitious Trade Name Registration (if applicable).

Copy of Current Safety Rating (if available).

Proof of Insurance (See item 5 on instruction sheet).

Certified check, money order or attorney's check.

11. Certification:

Applicant certifies that it is not now engaged in any intrastate transportation of
property 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.

You must sign the following application.

Verification of Application

I/we hereby state that the statements 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.

GUAN C. BRUCE
(Print Name)


(Signature)

10-09-01
(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) or by the President or Secretary (if a corporation).

PUC 189
Revised 10/00

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU
ROOM 308 NORTH OFFICE BUILDING
P.O. BOX 8722
HARRISBURG, PA 17105-8722

148

G-FORCE COURIER COMPANY

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT.
PLEASE NOTE THE FILE DATE AND THE SIGNATURE OF THE SECRETARY OF THE
COMMONWEALTH. 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, CALL (717) 787-1057.

ENTITY NUMBER: 3006461

MICROFILM NUMBER: 2001043

0282-0283

DERRICK HOWARD ESQ
2 PENN CENTER STE 200
PHILADELPHIA PA 19102

Microfilm Number

200143 - 282

Filed with the Department of State on

MAY 23 2001

Entity Number

3006461

Keri D'Amico
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: G-Force Courier Company

2. The (a) **address** of this 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) <u>1312 E. Cliveden Street, Philadelphia, PA 19119</u>	<u>Philadelphia</u>	<u>PA</u>	<u>19119</u>	<u>Philadelphia</u>
Number and Street	City	State	Zip	County

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

For a limited liability company represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the limited liability company is located for venue and official publication purposes.

3. The **name** and **address**, including street and number, if any, of each organizer are:

NAME	ADDRESS
<u>Derrick Howard, Esq.</u>	<u>The Law Office of Derrick Howard</u>
	<u>2 Penn Center, Suite 200</u>
	<u>Philadelphia, PA 19102</u>

4. ~~(Strike out if inapplicable): A member's interest in the company is to be evidenced by a certificate of membership interest.~~

5. ~~(Strike out if inapplicable):~~ Management of the company is vested in a manager or managers.

6. The **specified effective date**, if any is: May 21, 2001
month day year hour, if any

7. ~~(Strike out if inapplicable): the company is a restricted professional company organized to render the following restricted professional service(s):~~

8. For additional provisions of the certificate, if any, attach an 8 1/2 x 11 sheet.

PA DEPT OF STATE
MAY 23 2001

PA DEPT OF STATE
2001 JUN -4 AM 11:22

IN TESTIMONY WHEREOF, the organizer(s) has (have) signed this Certificate of Organization this 18th day of

May, 2001.

[Handwritten Signature]
(Signature)

(Signature)

(Signature)

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

The addressee named here has paid the PA P.U.C. for the following bill:

G-FORCE COURIER COMPANY
1312 E CLIVEDEN STREET
PHILADELPHIA PA 19119

DOCUMENT
FOLDER

DATE 10/12/01
RECEIPT # 199003

IN RE: Application fees for G-FORCE COURIER COMPANY

Docket Number A-00118324..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: TECI MO 370 6325 110

CHECK AMOUNT: \$100.00

DOCKETED

OCT 16 2001

C. Joseph Meisinger
(for Department of Revenue)

RECEIVED
2001 OCT 15 PM 2:51
SECRETARY'S BUREAU