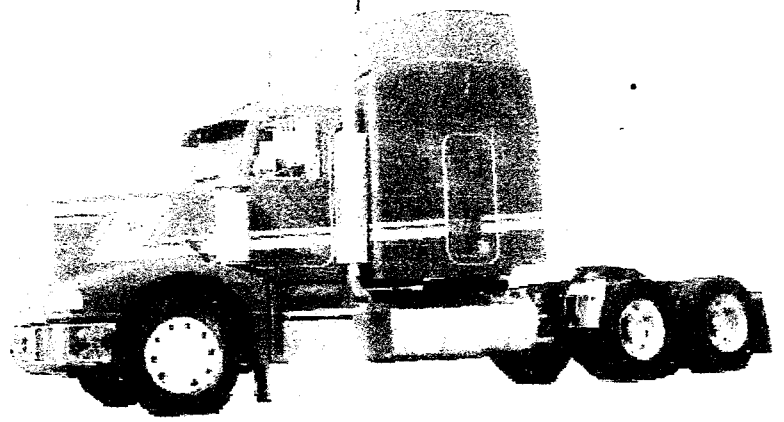


MRT
Robinson Trucking

Michael W. Robinson
PO Box 547
804 Old Curtin Road
Milesburg PA, 16853
Phone (814) 355-2141
Fax (814) 353-0780



PUC NO. A-8919259 12-12-16
To Whom it may Concern,
I Michael W. Robinson would
like to change the Name from:
MRT TRANSIT, LLC.
To:

DBA: MRT

If I have to do something different
than this, please let me know.

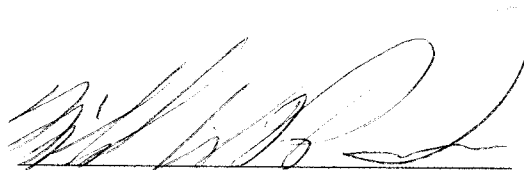
Michael W. Robinson

§1.36 Verification.

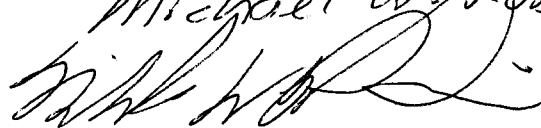
Verification

I, Michael W. Robinson, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief), and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

11-14-16
Date


Signature

To Whom it may Concern,
1- There Has Been No Change
of Ownership or Control.

Michael W. Robinson


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

Michael W Robinson
PO Box 547
MILESBURG PA 16853

RECEIVED
DEC 09 2016
HARRISBURG OFFICE

DBA: MRT

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

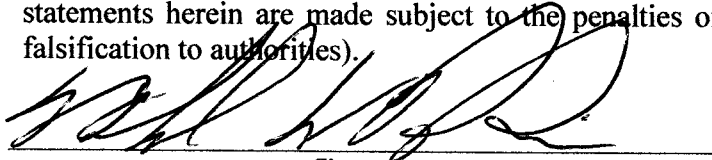
IF YOU HAVE ANY QUESTIONS PERTAINING TO THE BUREAU, PLEASE VISIT OUR WEBSITE AT www.dos.pa.gov/BusinessCharities OR YOU MAY CONTACT US BY TELEPHONE AT (717)787-1057. INFORMATION REGARDING BUSINESS AND UCC FILINGS CAN BE FOUND ON OUR SEARCHABLE DATABASE AT www.corporations.pa.gov/Search/CorpSearch.

ENTITY NUMBER : 6474648

FOR: PUC# A-8919259

VERIFICATION

I, Michael W. Robinson, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities).


Signature

12-12-16
Date

PUC# A-8919259



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

October 13, 2016

IN REPLY PLEASE
REFER TO OUR FILE

A-8919259
A-2016-2570697

25

MRT TRANSIT LLC
PO BOX 547
MILESBERG PA 16853

Re: Application of MRT Transit LLC, 804 Old Curtin Road
Milesburg, Centre County, PA 16853 (814.355.2141)

To Whom It May Concern:

Your application has been reviewed and it has been determined that a certificate of public convenience at PUC No. A-8919259 shall issue only upon compliance; Therefore,

YOU ARE ADVISED to contact your insurance agent/broker so that the required evidence of permanent insurance will be filed with this Commission.

A certificate of public convenience will be issued UPON THE FILING OF PERMANENT PROOF OF INSURANCE and compliance with any other provision of this letter:

- a. An acceptable Form E, as evidence of bodily injury and property damage liability insurance.
- b. An acceptable Form H, as evidence of cargo liability insurance or an Acceptable Exemption from Cargo Insurance, which can be found on our website: <http://www.puc.pa.gov/filings&resources/onlineforms/motorcarrierforms>

FAILURE TO FILE THE ABOVE REQUIRED EVIDENCE OF INSURANCE AND/OR COMPLY WITH ANY OTHER PROVISION OF THIS LETTER WITHIN SIXTY (60) DAYS OF THE DATE OF THIS LETTER CAN RESULT IN THE DISMISSAL OF THE APPLICATION AND REQUIRE THE FILING OF A NEW APPLICATION AND FILING FEE.

You may want to operate prior to filing permanent proof of insurance. (Temporary proof of insurance is only good for 60 days from the date of this letter). You need to file:

For bodily injury and property damage (BIPD) only (submit one)

- a. *A copy of the insurance identification card for vehicles registered in Pennsylvania (which contains the exact name of the company only); or*
- b. *A copy of the declaration page of the insurance policy; or*
- c. *A copy of a valid binder of insurance; or*
- d. *A copy of a valid application for insurance to the Pennsylvania Automobile Insurance Plan, and*