

SCHUBERT ♦ GALLAGHER

LAW OFFICES



TYLER ♦ MULCAHEY

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Richard T. Mulcahey, Jr.
Also Member of New York Bar
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e-mail: rmulcahey@sgtmlaw.com

June 19, 2017

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265

RECEIVED
2017 JUN 21 AM 10:21
PA PUC
SECRETARY'S BUREAU

Re: Application of Good Foodie, LLC, t/a JSI Trucking

Dear Ms. Chiavetta:

Please be advised that this office represents the above captioned Applicant. Accordingly, I enclose herewith an original Application for Motor Common Carrier of Property, together with our check of \$100.00, for the filing fee. Please process the enclosed Application.

The Applicant had previously filed for authority before this Commission on February 6, 2017 and was subsequently assigned docket numbers A-2017-2588134 and A-8919578. Due to miscommunications with the insurance carrier, appropriate proof of insurance coverage was not timely filed and the Application was dismissed. My client has the requisite technical and financial fitness to operate as a common carrier in Pennsylvania and is prepared to fully and timely comply with all requirements of a Commission's compliance order issued in connection with this Application.

Kindly acknowledge receipt of the enclosures by time-stamping the enclosed copy of this letter and returning to me in the self-addressed envelope provided.

Respectfully submitted,

Richard T. Mulcahey, Jr.

RTMJR/hs
Enclosures
cc: Good Foodie, LLC, t/a JSI Trucking

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)

Good Foodie, 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)

JSI Trucking

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?** **X** **NO** **Previous Authority?** **X** **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 6373496
(see checklist and indicate type of business entity registered)

PA PUC
SECRETARY'S BUREAU

2017 JUN 21 AM 10:22

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

231 E. Luzerne Street

Street Address

Philadelphia, PA 19124

City, State and Zip Code

215-455-1600

Telephone Number

Philadelphia

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)

Same as above.

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)

Richard T. Mulcahey, Jr., Esquire 215-587-0107

Attorney's Name & Telephone Number for this Filing

121 South Broad Street, 20th Floor, Philadelphia, PA 19107-4533

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?**

X No Yes, at No. _____

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

General property and commodities between points in Pennsylvania, excluding household goods in use.

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.

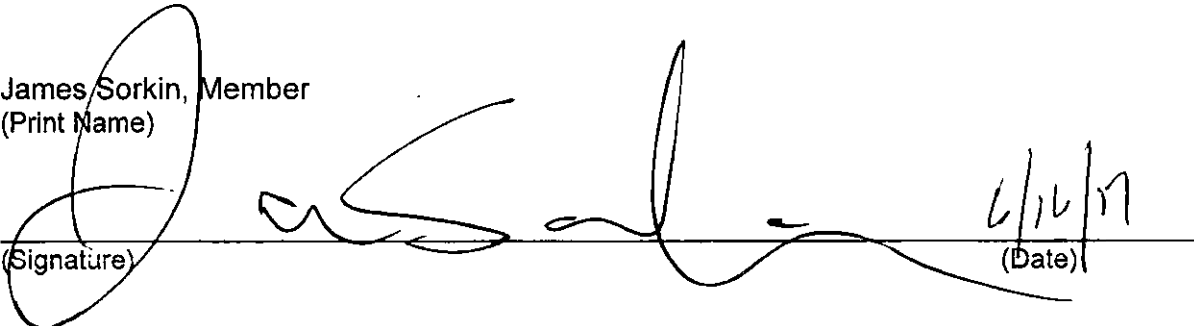
Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Property; and acknowledges that failure to report revenue 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.

James Sorkin, Member
(Print Name)


(Signature)

6/16/17
(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).

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2017 JUN 21 AM 10:22
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SECRETARY'S BUREAU

Entity# : 6501853
Date Filed : 01/19/2017
Pedro A. Cortés
Secretary of the Commonwealth

**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

Return document by mail to:
Richard T. Mulcahey, Jr., Esquire
Name
121 South Broad Street, 20th Floor
Address
Philadelphia, PA 19107-4533
City State Zip Code
 Return document by email to: _____

Registration of Fictitious Name
DSCB-54-311

TML170126ET0906

Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$70

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

1. The fictitious name is:
JSI Trucking

2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:
Transportation of property

3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):

| | | | | |
|-----------------------------|---------------------|-----------|--------------|---------------------|
| <u>231 E Luzerne Street</u> | <u>Philadelphia</u> | <u>PA</u> | <u>19124</u> | <u>Philadelphia</u> |
| Number and street | City | State | Zip | County |

4. The name and address, including number and street, if any, of each individual interested in the business is:

| Name | Number and Street | City | State | Zip |
|------------|-------------------|------|-------|-----|
| <u>N/A</u> | | | | |
| | | | | |
| | | | | |
| | | | | |

PA DEPT. OF STATE
JAN 19 2017

5. Each entity, other than an individual, interested in such business is (are):

| | | |
|---|---------------------------|-------------------------|
| Good Foodie, LLC | Limited Liability Company | Pennsylvania |
| Name | Form of Organization | Organizing Jurisdiction |
| 231 E. Luzerne Street, Philadelphia, PA 19124 | | |
| Principal Office Address | | |
| PA Registered Office, if any | | |
| Name | Form of Organization | Organizing Jurisdiction |
| Principal Office Address | | |
| PA Registered Office, if any | | |

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. (Optional). The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

7th day of January, 2017

Individual Signature

Individual Signature

Entity Name

Signature

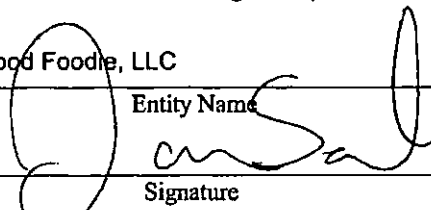
Title

Individual Signature

Individual Signature

Good Foodie, LLC

Entity Name



Signature

James Sorkin, Member

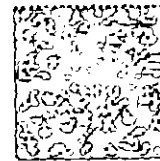
Title

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

In Re: Application of Good Foodie, LLC t/a JSI Trucking

The following individuals are Members of Applicant, a Pennsylvania Limited Liability Company:

| Name and Address: | Percentage Interest |
|---|---------------------|
| James Sorkin, Member 231 E. Luzerne Street Philadelphia, PA 19124 | 50% |
| Ted Sorkin, Member 231 E. Luzerne Street Philadelphia, PA 19124 | 50% |



UNITED STATES POSTAGE
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