

11/29/2020

Dear Secretary of P.U.C,

Please be aware that Tracy E. Kulick t/a V-TEK ENTERPRISES Pa. P.U.C #A-2018-3005567, has gone through a name change only, with no change in ownership or percentage of ownership. Tracy E. Kulick t/a V-TEK ENTERPRISES has been changed to V-TEK ENTERPRISES LLC. With no lapse in insurance coverage

Vince Kulick co-owner

A handwritten signature in black ink, appearing to read "Vince Kulick", is written over a horizontal line. The signature is somewhat stylized and overlaps the line.

PENNSYLVANIA PUBLIC UTILITY COMMISSION

IN THE MATTER OF: A-8921518

*Application of Tracy E. Kulick t/a V Tek Enterprises, 1114 Route 313, Perkasie, Bucks County, Pennsylvania 18944, (267) 640-2967.
To transport, as a motor common carrier, property, excluding household goods in use, between points in Pennsylvania. A-2018-3005567*

EFFECTIVE: November 1, 2018

The Pennsylvania Public Utility Commission hereby certifies that after an investigation and/or hearing, it has, by its report and order made and entered, found and determined that the granting of the application is necessary or proper for the service, accommodation, convenience and safety of the public and hereby issues to the applicant this **CERTIFICATE OF PUBLIC CONVENIENCE** evidencing the Commission's approval to operate as a motor carrier.

In Witness Whereof, The PENNSYLVANIA PUBLIC UTILITY COMMISSION has caused these presents to be signed and sealed, and duly attested by its Secretary at its office in the city of Harrisburg this 1st day of November, 2018.


Secretary



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

Return document by mail to:
 Vince Kulick
 Name
 1114 Route 313
 Address
 Perkasio PA 18944
 City State Zip Code
 Return document by email to: _____

Certificate of Organization
 Domestic Limited Liability Company
 DSCB:15-8821 (rev. 2/2017)

 TML200207DD0085

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

Fee: \$125 I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 15 Pa.C.S. § 8821 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company is: V-Tek Enterprises, LLC
 (designator is required, e.g., "company," "limited" or "limited liability company" or any abbreviation thereof)

2. Complete part (a) or (b) – not both:

(a) The address of this limited liability company's registered office in this Commonwealth is:
 (post office box alone is not acceptable)

| | | | | |
|-------------------|----------|-------|-------|--------|
| 1114 Route 313 | Perkasie | PA | 18944 | Bucks |
| Number and Street | City | State | Zip | County |

(b) The name of this limited liability company's commercial registered office provider and county of venue is:

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

3. The name of each organizer is (all organizers must sign on page 2):

Vince Kulick

Tracy Kulick

4. Effective date of Certificate of Organization (check, and if appropriate complete, one of the following):

- The Certificate of Organization shall be effective upon filing in the Department of State.
- The Certificate of Organization shall be effective on: _____ at _____
 Date (MM/DD/YYYY) Hour (if any)

5. Restricted professional companies only.

Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).

The company is a restricted professional company organized to render the following restricted professional service(s):

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

6. Benefit companies only.

Check the box immediately below if the limited liability company is organized as a benefit company:

This limited liability company shall have the purpose of creating general public benefit.

Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.

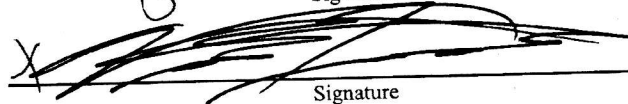
This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):

7. For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).

IN TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this

29 day of January, 2020.

X 
Signature

X 
Signature

Signature

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

V-TEK ENTERPRISES
1114 RT 313
PERKASIE PA 18944-0

V-Tek Enterprises, LLC

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.

Thank you for registering with the Department of State to do business in Pennsylvania. Like many other businesses, you may have employees, sell taxable products, or provide a taxable service to consumers in Pennsylvania. Please visit www.pa100.state.pa.us to register for Business Taxes with the PA Department of Revenue & Labor and Industry or visit www.Business.pa.gov to find answers to most common registration questions.

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 : 7010558

VERIFICATION

I, VINCE KULICK, 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

11/29/2020
Date