



CARRIER SETUP PACKAGE

Carrier Information Page

IRS Form W-9

Broker - Carrier Transp. Agreement

**Carrier Authority {Issued by US DOT
FMCSA) certificate of Cargo & Liability**

Insurance listing

Profile & References

GENERAL INFORMATION:

Carrier Name: G-3 Resources LLC

**Mailing Address: 4401 N.6th St, 625
McAllen, TX 78504**

**Street Address: 5205 W. TX 107, Suite C,
Edinburg, TX 78539**

Phone: 956.513.1023

Fax: 956.720.4551

Federal Tax ID: 27-3618259

State of Incorp.: Texas

USDOT #: 2886735

MC #: 969130

IFTA: TX27361825918

DUNS #: 036203443

BANKING INFORMATION:

**Bank of America
7524 N. 10th Street,
McAllen, TX 78504**

**Contact: Alejandro Cruz
956.928.7158
acruz9@bankofamerica.com**

INSURANCE INFORMATION:

Insurance Agency: Hallmark Mutual County, Inc.

Commercial Liability: \$1,000,000

Cargo Liability: \$100,000

Policy #: M42400043-01/ A42509620-01

Insurance Agent: Omar Sebiti

Email: omar@theglobalfinancial.com

Phone:

Fax: 972.366.3289

CONTACT INFORMATION:

IDUA OLUNWA

469.432.6796

Trucking@G3RLLC.com

HECTOR RODRIGUEZ

956.258.7379

Dispatch@G3RLLC.com

ARTURO OLIVAREZ

956.416.9602

Fleet Maintenance

EQUIPMENT INFORMATION:

Trucks: 13	Trailers: 13	Trailer Type: 53' Reefer
On Board Communication: Phone		ELD: Pending

PROFILE:

G-3 Resources is an integrated refrigerated trucking company in Edinburg, TX. Started as a consulting group in 2010 and focused in transportation leasing its trucks in 2015 to running an all refrigerated fleet in 2016.

Our team is made up of seasoned drivers who have been in the business for decades and understand the reliability, efficiency and professionalism required to stay competitive. Our base in Edinburg, TX provides parking and servicing for our equipment.

Currently, we have 13 trucks with 11 running over the road in the Midwest, 12 refrigerated trailers with carrier units, 12 drivers and 3 back end staff covering operations, compliance, accounting and maintenance. Our safety and compliance department is also overseen by TCS America, a DOT compliance company run by former troopers.

Our Mission: Become a company of good reputе in the transportation industry.

Our Objective: Safely provide friendly, efficient, profitable and dedicated transportation service while building long term business relationships.

REFERENCES:

COMPANY	NAME	NUMBER	EMAIL
CH Robinson	Kristen Brace	403.252.0808	kristen.brace@chrobinson.com
Coyote	Keith Dahle	773.365.6043	keith.dahle@coyote.com
Nolan Transport	Jim Kurinsky	480.577.4888	jim.kurinsky@ntgfreight.com
Coastal Carriers	Brock Niemeyer	636.528.8988	brockn@coastalcarriers.com

PAYMENT INFORMATION:

All Invoices are assigned and payable to: Multi Service Factoring

P.O. Box 842597 Dallas, TX 75284 E-mail: operations@multiservicefactoring.com

Phone: (888)647-6597

Fax: (913) 217.9383



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE

June 17, 2016

CERTIFICATE

MC-969130-C

U.S. DOT No. 2886735

G-3 RESOURCES LLC

MCALLEN, TX

This Certificate is evidence of the carrier's authority to engage in transportation as a **common carrier of property (except household goods)** by motor vehicle in interstate or foreign commerce.

This authority will be effective as long as the carrier maintains compliance with the requirements pertaining to insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The carrier shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

A handwritten signature in black ink, reading "Jeffrey L. Secrist".

Jeffrey L. Secrist, Chief
Information Technology Operations Division

NOTE: Willful and persistent noncompliance with applicable safety fitness regulations as evidenced by a DOT safety fitness rating of "Unsatisfactory" or by other indicators, could result in a proceeding requiring the holder of this certificate or permit to show cause why this authority should not be suspended or revoked.

CMO



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/6/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER O.S Productions DBA All Star Insurance 300 Decker Drive Suite 320 Irving TX 75062	CONTACT NAME: Omar Sebita PHONE (A/C. No. Ext): Email for certificate FAX (A/C. No): 972-366-3289 E-MAIL ADDRESS: omar@theglobalfinancial.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED G-3 Resources LLC 4401 N 6th St Apt 625 McAllen TX 78504	INSURER A: Hallmark County Mutual Insurance NAIC # 29408	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:2017-2018

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			M42400043-01	6/8/2016	6/8/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			A42509620-01	6/8/2016	6/8/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Motor Truck Cargo			M42400043-01	6/8/2016	6/8/2018	\$100,000 Reefer Breakdown DED \$1000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

2010 Freightliner VIN: 1FUJA6DR2ADAN3642 2007 International VIN: 2HSCNAPR17C312038
2007 Freightliner VIN: 1FUJBBCG07LW34154 2013 Peterbilt VIN: 1XP4D49XXDD180095
2005 Freightliner VIN: 1FUJA6AV15LN71350 2009 International VIN: 2HSCUAPR69C694945
2007 Kenworth VIN: 1XKAD49X07J189838 2005 Freightliner VIN: 1FUJA6AV86LV63585
2011 Freightliner VIN: 1FUJGLDR4BLAY2225
2007 Kenworth VIN: 1XKADB9X27J195628
2012 Freightliner VIN: 1FUJGLDR0CLBU1109

CERTIFICATE HOLDER**CANCELLATION**

.	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Omar Sebita/OMAR

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ACORD 25 (2014/01)

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INS025 (201401)

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. G-3 RESOURCES LLC	
	2 Business name/disregarded entity name, if different from above G-3 RESOURCES LLC	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ S Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) 4401 N. 6TH ST, 625	Requester's name and address (optional)
	6 City, state, and ZIP code MCALLEN, TX 78504	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number										
or										
Employer identification number										
2	7		-	3	6	1	8	2	5	9

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ <i>Adua Okunwa</i>	Date ▶ 7/1/2017
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.