COMPANY INFORMATION PACKET

CONTACTS

ACCOUNTS RECEIVABLE
Audra Newton
EXT. 104
Direct Line: (616) 965-6225
ar@fifthwheelfreight.com

ACCOUNTS PAYABLE
Ashley Sanders
EXT. 135
Direct Line: (616) 965-2127
ap@fifthwheelfreight.com

PACKET CONTENTS

- Contact Information
- FWF Mission Statement
- Authority
- SCAC Renewal
- W-9
- Insurance
- Surety Bond
- Diamond Broker Program Certificate
FIFTH WHEEL FREIGHT, LLC

Our Mission

To create long-term relationships with customers, carriers, and vendors built through unparalleled service and reliability. To develop exceptional company culture that inspires upstanding business practices which empowers all company stakeholders to achieve the highest levels of success.

For more information regarding our services, please visit our website at:

www.fifthwheelfreight.com

Thank you for considering Fifth Wheel Freight, LLC for your logistical solutions and we look forward to earning your business.
LICENSE
MC-806984-B
U.S. DOT No. 2362964
B & L SYSTEMS LLC
D/B/A FIFTH WHEEL FREIGHT
LANSING, MI

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a broker, arranging for transportation of freight (except household goods) by motor vehicle.

This authority will be effective as long as the broker maintains 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 applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Jeffrey L. Secrist, Chief
Information Technology Operations Division

BPO
The Standard Carrier Alpha Code of CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) RENEWAL

This Alpha Code will apply only to the company name shown above through June 30, 2019. Approximately two months prior to expiration of this SCAC, NMFTA will provide a renewal notice which must be promptly returned together with payment to ensure its continued validity. Should the company name or address change, please notify the National Motor Freight Association, Inc. at the address below.

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

If you participate in the Customs & Border Protection (CBP) ACE program and you have any issue with ACE and your SCAC, please contact CBP at the following address:

AMS.SCAC@DHS.GOV
Customs and Border Protection
Attention: SCAC Beauregard, Cube: A-344
1801 N. Beauregard Street
Alexandria, VA 20598-1350

All SCACs are automatically uploaded to ACE within 24 hours.

NOTICE: Renewal of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810.
REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

1. Name* (as shown on your income tax return. Name is required on this line. Do not leave this line blank.)
   B&L Systems, LLC DBA Fifth Wheel Freight

2. Business name/disregarded entity name, if different from above

3. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.
   - Individual sole proprietor or single-member LLC
   - C Corporation
   - S Corporation
   - Partnership
   - Trust/estate
   - Limited liability company. Enter the tax classification (C or S corporation, P = Partnership) S
   - 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)

5. Address (number, street, and apt. or suite no.) See instructions.
   4460 44th Street SE Suite D

6. City, state, and ZIP code
   Kentwood, MI 49512

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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see "How to get a TIN," later.

Note: If the account is in more than one name, see the instructions for line 1. Also see "What Name and Number To Give the Requester for guidelines on whose number to enter."

<table>
<thead>
<tr>
<th>Social security number</th>
</tr>
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<tbody>
<tr>
<td>0 0 0 0 0 0 0 0 0 0 0 0</td>
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</table>

<table>
<thead>
<tr>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 6 1 1 2 2 5 0 1</td>
</tr>
</tbody>
</table>

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 for Part II, later.

SIGN HERE

Signature of U.S. person

DATE

1/7/19

GENERAL INSTRUCTIONS

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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," later.
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN
ACCORDANCE WITH THE POLICY PROVISIONS.

INSURER(S) AFFORDING COVERAGE

<table>
<thead>
<tr>
<th>INSURER</th>
<th>NAIC #</th>
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<tbody>
<tr>
<td>INSURER A: Beazley Marine Ins Syndicate 2623/623</td>
<td></td>
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</tbody>
</table>

PRODUCER

Integro Insurance Brokers
161 North Clark, Suite 1850
Chicago, IL 60601

INSURED

B & L Systems LLC dba Fifth Wheel Freight
4460 44th Street NE
Kentwood, Michigan 49512

COVERAGES

CERTIFICATE NUMBER: 030258

| INSR |

<table>
<thead>
<tr>
<th>LTR</th>
<th>TYPE OF INSURANCE</th>
<th>ADDL</th>
<th>SUB-INSURED</th>
<th>WVR</th>
<th>POLICY NUMBER</th>
<th>POLICY EFF (MM/DD/YYYY)</th>
<th>POLICY EXP (MM/DD/YYYY)</th>
<th>LIMITS</th>
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<tbody>
<tr>
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<td>COMMERCIAL GENERAL LIABILITY</td>
<td>SUB-INSURED</td>
<td>WVR</td>
<td>W0602118PNVE</td>
<td>06/06/2018</td>
<td>03/20/2019</td>
<td>$3,000,000</td>
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<td></td>
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<td>OCCUR</td>
<td>LOC</td>
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AUTOMOBILE LIABILITY

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<th>ANY AUTO</th>
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<th>HIRED AUTOS</th>
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<tbody>
<tr>
<td></td>
<td>SCHEDULED</td>
<td>NON-OWNED</td>
</tr>
<tr>
<td></td>
<td>AUTOS</td>
<td>AUTOS</td>
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</tbody>
</table>

UMBRELLA LIABILITY

<table>
<thead>
<tr>
<th>EXCESS LIABILITY</th>
<th>OCCUR</th>
<th>CLAIMS-MADE</th>
</tr>
</thead>
</table>

DED RETENTION $|

WORKERS COMPENSATION AND EMPLOYERS LIABILITY

| ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | PER STATUTE | Differ |
|-----------------------------------------------------------|-------------|========|
| Mandatory in NH If yes, describe under DESCRIPTION OF OPERATIONS below |

A CONTINGENT CARGO

| W0602118PNVE | 03/20/2018 | 03/20/2019 | Occurrence | $250,000 |

A CONTINGENT AUTO

| W0602118PNVE | 03/20/2018 | 03/20/2019 | Aggregate | $1,000,000 |

A ERRORS & OMISSIONS

| W0602118PNVE | 03/20/2018 | 03/20/2019 | Aggregate | $100,000 |

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

CERTIFICATE HOLDER

Fifth Wheel Freight, LLC
4460 44th ST SE Suite D
Kentwood, Michigan 49512

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

Kate Hartman

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# Certificate of Liability Insurance

**Date:** 11/20/2018

**Certificate Number:** 16083848

**Type of Insurance:**
- Commercial General Liability
  - Claims-Made
  - Occur
  - Genl Aggregate Limit Applies Per:
    - Policy
    - LOC
  - Other
- Automobile Liability
  - Any Auto
  - All Owned Autos
  - Scheduled Autos
  - Non-Owned Autos
  - HIRED AUTOS
  - UMBRELLA LIAB
  - OCCUR
  - CLAIMS-MADE
- Excess Liability
  - OED
  - Retention $  

**Insured:** Fifth Wheel Freight  
4460 44th Street SW, Suite D  
Grand Rapids, MI 49512

**Contact Person:** Ryan L. Rozycki  
PHONE: 231-726-4046  
E-MAIL: rlr@waterstoneinsurance.com

**Producers:** Waterstone Insurance Agency  
P.O. Box 0975  
Muskegon, MI 49443-0975  
Ryan L. Rozycki

**Insurers:**
- Home-Owners Ins. Co.  
NAIC #: 26638  
POLICY NUMBER: 18988
- Auto Owners Ins. Company
- Other

**Coverages:**

<table>
<thead>
<tr>
<th>Description of Operations / Locations / Vehicles (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)</th>
</tr>
</thead>
</table>

**Description of Operations / Locations / Vehicles (ACORD 101, Additional Remarks Schedule, may be attached if more space is required):**

**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).

**Certification:**

**Certificate Holder:** Ryan L. Rozycki  
P.O. Box 0975  
Muskegon, MI 49443-0975  
E-MAIL: rlr@waterstoneinsurance.com

**Cancellation:**

**For Record Only:**

**Authorized Representative:** Ryan L. Rozycki

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A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2120-0017. Public reporting for this collection of information is estimated to take approximately 10 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and submitting the collection of information. All responses to this collection of information are voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC 233A, Washington, DC 20590.

United States Department of Transportation
Federal Motor Carrier Safety Administration

Broker's or Freight Forwarder's Surety Bond under 49 U.S.C. 13906

FORM BMC-84

Filer FMCSA Account Number: 09135

Bond No. ITI414ICC

License No. MC: 806984

KNOW ALL MEN BY THESE PRESENTS, that we, B & L SYSTEMS LLC dba FIFTH WHEEL FREIGHT (Name of Broker or Freight Forwarder)
of 4460 44TH STREET SE, STE D KENTWOOD Michigan 4950 (Street) (City) (State) (Zip)
as PRINCIPAL (hereinafter called Principal), and Navigators Insurance Company (Name of Surety) (hereinafter called Surety), are held and firmly bound unto the United States of America in the sum of $75,000 for the benefit of motor carriers and shippers, for which payment, well and truly to be made, we bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severally, in the penalty stated herein.

WHEREAS, the Principal is or intends to become a Broker or Freight Forwarder pursuant to the provisions of Title 49 U.S.C. 13904, and the rules and regulations of the Federal Motor Carrier Safety Administration relating to insurance or other security for the protection of motor carriers and shippers, and has elected to file with the Federal Motor Carrier Safety Administration such a bond as will ensure financial responsibility and the supplying of transportation subject to the ICC Termination Act of 1995 in accordance with contracts, agreements, or arrangements therefore, and

WHEREAS, this bond is written to assure compliance by the Principal as either a Licensed Broker or a Licensed Freight Forwarder of Transportation by motor vehicle with 49 U.S.C. 13906(b), and the rules and regulations of the Federal Motor Carrier Safety Administration, relating to insurance or other security for the protection of motor carriers and shippers, and shall inure to the benefit of any and all motor carriers or shippers to whom the Principal may be legally liable for any of the damages herein described.

NOW, THEREFORE, the condition of this obligation is such that if the Principal shall pay or cause to be paid to motor carriers or shippers by motor vehicle any sum or sums for which the Principal may be held legally liable by reason of the Principal's failure faithfully to perform, fulfill, and carry out all contracts, agreements, and arrangements made by the Principal while this bond is in effect for the supplying of transportation subject to the ICC Termination Act of 1995 under license issued to the Principal by the Federal Motor Carrier Safety Administration, then this obligation shall be void, otherwise to remain in full force and effect.

The liability of the Surety shall not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments shall amount in the aggregate to the penalty of the bond, but in no event shall the Surety's obligation hereunder exceed the amount of said penalty. The Surety agrees to furnish written notice to the Federal Motor Carrier Safety Administration forthwith of all suits filed, judgments rendered, and payments made by said Surety under this bond.

This bond is effective the 13th day of September 2015, 12:01 a.m., standard time at the address of the Principal as stated herein and shall continue in force until terminated as hereinafter provided. The Principal or the Surety may at any time cancel this bond by written notice to the Federal Motor Carrier Safety Administration at its office in Washington, D.C., such cancellation to become effective thirty (30) days after actual receipt of said notice by the FMCSA on the prescribed Form BMC-36, Notice of Cancellation Motor Carrier and Broker Surety Bond. The Surety shall not be liable hereunder for the payment of any damages herein before described which arise as the result of any contracts, agreements, undertakings, or arrangements made by the Principal for the supplying of transportation after the termination of this bond as herein provided; but such termination shall not affect the liability of the Surety hereunder for the payment of any such damages arising as the result of any contracts, agreements, or arrangements made by the Principal for the supplying of transportation prior to the date such termination becomes effective.

The receipt of this filing by the FMCSA certifies that a Broker Surety Bond has been issued by the company identified above, and that such company is qualified to make this filing under Section 387.315 of Title 49 of the Code of Federal Regulations.

Falsification of this document can result in criminal penalties prescribed under 18 U.S.C. 1001.
IN WITNESS WHEREOF, the said Principal and Surety have executed this instrument on the 13th day of September, 2015.

PRINCIPAL

B & L SYSTEMS LLC dba FIFTH WHEEL FREIGHT
COMPANY NAME
4460 44TH, STE D KENTWOOD
STREET ADDRESS CITY
Michigan 4950 517-708-8816
STATE ZIP CODE TELEPHONE NUMBER

Brian Bennett II, Owner/Partner
(type or print Principal officer's name and title)
(Principal officer's signature)

Adam Green
(type or print witness's name)
(witness's signature)

SURETY

Navigators Insurance Company
COMPANY NAME
400 Atlantic Street, 8th Floor Stamford
STREET ADDRESS CITY
Connecticut 06901 847-285-9000
STATE ZIP CODE TELEPHONE NUMBER

Michelle E. Lucaccioni
(type or print Principal officer's name and title)
(Principal officer's signature)

Philip DiChiara
(type or print witness's name)
(witness's signature)

FORM BMC-84 Page 2 of 2
Diamond Broker Program

B & L Systems LLC
dba
Fifth Wheel Freight

Is a participating member of the
TIA Certified Diamond Broker Program

Meeting all performance, credit and bonding requirements of
Truckstop.com and Transportation Intermediaries Association.

Valid through June 2019 – MC 806984