Holder of Permit CC- <u>62/09</u> asks th		
the business structure of the carrier named below under 81.80 RCW and WAC 480-14 to:		
NEW BUSINESS INFORMATION		
New Name: SED LOGISTICS INC Trade Name: DRA- FOOTHILLS EXPRESS	Phone #: 425-531-1465	
Trade Name: DBA- FINTHILLS EXPRESS	Fax #: SAM 2	
Maining Address:	Physical Address: (if different) 38/35	
Street/P.O. Box 1058	Street 38 TH AVE S	
City, State Zip MILTON WA 98354	City, State Zip AUBURN WA 9.8001	
USDOT # 1428045 www.fmcsa.dot.gov/online-registration or contact 360-59	(If you don't have one you can apply online at	
Unified Business Identifier Number (UBI): 602 - 705 - 732		
□ Individual □ Partnership ➤ Corporation – State of Incorporation WA (LP, LLP, LLC)		
NAME TITLE PERCENTANGE OF SHARES		
DOUGLAS PLALER SECTREA Sharyl Pfaller PRES	4990	
CUDDENT DUCK	TEST INFORMATION	
	ESS INFORMATION	
Current Name: PLALLER, DOUGLAS M	Phone #: 425-531-1465	
Trade Name: FOOTHILLS EXPRESS	Fax#: SAm E	
Mailing Address		
Mailing Address:	rilysical Address. 38/33	
Street/P.O. Box Po Box 1058	Physical Address: 38/35 Street 38 PAVE 5	
Street/P.O. Box Po Box 1058	Street 38 Thank 5	
	Street 38 Thank 5	
Street/P.O. Box Pb Box 1658 City, State Zip MITON WA 98354 □ Individual □ Partnership □ Corporation NAME TITLE	Street 38 Thank 5	
Street/P.O. Box Ph Box 1658 City, State Zip MILTON WA 98354 □ Individual □ Partnership □ Corporation	Street 38 PAVE 5 City, State Zip AVBURN WA 9800/ n – State of Incorporation	
Street/P.O. Box Pb Box 1658 City, State Zip MITON WA 98354 □ Individual □ Partnership □ Corporation NAME TITLE	Street 38 PAVE 5 City, State Zip AVBURN WA 9800/ n – State of Incorporation	
Street/P.O. Box Ph Box 1658 City, State Zip MilTow wh 98354 Individual Partnership Corporation NAME TITLE SAME AS ABOVE CERTIFICATION: Carrier affirms that the charchange in ownership, management, or control of	Street 38 PAVE 5 City, State Zip AUBURN WA 9800/ n – State of Incorporation PERCENTANGE OF SHARES age of name or business structure does not involve a the operating authority. The undersigned applicant	
Street/P.O. Box Ph Box 1658 City, State Zip MilTov wA 98354 Individual Partnership Corporation NAME TITLE SAME AS ABOVE CERTIFICATION: Carrier affirms that the charchange in ownership, management, or control of requests that the Commission enter an order grant	Street Street Street Street City, State Zip AUBURN WA 9800/ n – State of Incorporation PERCENTANGE OF SHARES age of name or business structure does not involve a the operating authority. The undersigned applicant atting its petition as provided in 81.80 RCW	
Street/P.O. Box Physics 1658 City, State Zip Milton wh 98354 Individual Partnership Corporation NAME TITLE SAME AS ABOUT CERTIFICATION: Carrier affirms that the charchange in ownership, management, or control of requests that the Commission enter an order grant I certify or declare under penalty of perjury under	City, State Zip AUBURN WA 9800/ n – State of Incorporation PERCENTANGE OF SHARES age of name or business structure does not involve a the operating authority. The undersigned applicant atting its petition as provided in 81.80 RCW are the laws of the State of Washington that he	
Street/P.O. Box Ph Box 1658 City, State Zip MilTov wA 98354 Individual Partnership Corporation NAME TITLE SAME AS ABOVE CERTIFICATION: Carrier affirms that the charchange in ownership, management, or control of requests that the Commission enter an order grant	City, State Zip AUBURN WA 9800/ n – State of Incorporation PERCENTANGE OF SHARES age of name or business structure does not involve a the operating authority. The undersigned applicant atting its petition as provided in 81.80 RCW are the laws of the State of Washington that the	
Street/P.O. Box Physics 1658 City, State Zip Milton wh 98354 Individual Partnership Corporation NAME TITLE SAME AS ABOUT CERTIFICATION: Carrier affirms that the charchange in ownership, management, or control of requests that the Commission enter an order grant I certify or declare under penalty of perjury under	City, State Zip AUBURN WA 9800/ n – State of Incorporation PERCENTANGE OF SHARES age of name or business structure does not involve a the operating authority. The undersigned applicant atting its petition as provided in 81.80 RCW are the laws of the State of Washington that he	
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1300 South Evergreen Park Drive SW

PO Box 47250 Olympia, WA 98504-7250 Phone (360) 664-1222 Fax (360) 586-1181

Web Site: www.wutc.wa.gov

COMMON CARRIER OF PROPERTY

(excluding Household Goods carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE FEE: \$50.00

Application for Change of Nar circumstances:	me or Business Structure may be used ONLY in the following
circumstances.	
 Change of business stratus business when the indipartnership, when the inproprietorship of the majority partner. Change of name resulting corporation established majority stockholders in the Change of name resulting corporation. 	ame, with no change in ownership or business structure. ucture from individual to corporation to incorporate an individual' vidual is the majority stockholder or, by an individual to a individual is the majority partner or, from a corporation to a najority shareholder or, by a partnership to a proprietorship of the ing from a change in business structure from a partnership to a late incorporate the partnership business, when the partners are the in the same proportionate ownership. In the same proportionate ownership ing from a change in business structure from a corporation to here both corporations are wholly owned by the same stockholders is.
· · · · · · · · · · · · · · · · · · ·	
	TYPE OF PAYMENT
□ Cash Check Credit Card Information (if applie	□ Money Order □ AMEX □ MasterCard □ Visa Exp Date cable) Month/Year
	COMPANY NAME: igned, under penalty for false statement, certify that the following hat I am authorized to execute and file this document on behalf of the n on file is current and valid.
Cardholder's signature:	Date
54D Logistic	s Inc (ac-162109)
For Commission Use Only	7/17
111-2068-200-02 \$0.00	Received date: 8-29-11 ID: 6612
D33564	Insurance: 10-25-1/

CC-62109:

FORM E UNIFORM MOTOR CARRIER BODILIY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

WASH. UT. & TP. COMM

(EXECUTED IN TRIPLICATE)

Filed with Washington Utilities & Transportation Commission (hereinafter called Commission)

This is to certify, that the Mutual of Enumciaw Insurance Company #1359

(hereinafter called Company) of 1460 Wells Street, Enumciaw WA 98022

has issued to S & D LOGISTICS INC of PO BOX 1058 MILTON WA 98354

a policy or policies of insurance effective from 02/22/11 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be affected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 1460 Wells St, Enumclaw WA 98022

this 20TH day of OCTOBER 2011.

Insurance Company File No: CPP0002923

Authorized Company Representative)

MC 1633a (Ed. 8-99) U.P. & S., INC

IRB 3539B