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### YOU PICK THE LOCATION...WE'LL GET IT THERE!

It is our mission at Brilliant Shipping to help you get the best out of your logistics operations.

Lowering costs, providing solutions on how to move your freight quickly, and how to minimize using so many different parties to achieve the same results.

We are solution providers, but before providing a solution, we must first build a relationship that is detailed around your logistics operation. The more we know about what you want to do or can't do, the better we can provide a solution for you.

We can manage your whole logistics operation or just a portion of it. We take the strain off you by providing freight moving solutions that will profit you and your customers.





Technology is one of the reasons why we're able to provide multimodal shipping capabilities

## We specialize in:

- Truckload
- LTL (Less Than Truckload)
- Intermodal
- Drayage
- Expedited
- Heavy Haul



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

SERVICE DATE June 11, 2021

LICENSE MC-1251531-B

U.S. DOT No. 3641548 BRILLIANT SHIPPING LLC UNION, NJ

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

Alfy t. Sient

Information Technology Operations Division

BPO

OMB	No.:	2126-(	017

USDOT Number:	Date Received:
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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 2126-0017. Public reporting for this collection of information is estimated to be approximately 10 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. 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-RRA, Washington, D.C. 20590.



Bond Number: 3740277 MC# and/or FF#: MC01251531

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

# **FORM BMC-84**

KNOW ALL MEN BY THESE PRESENTS, that we,		T SHIPPING LLC	
	(Name of Broker or Freight Forwarder)		
of 934 STUYVESANT AVE STE 3	UNION	New Jersey	07083
(Street)	(City)	(State)	(Zip)
as PRINCIPAL (hereinafter called Principal), and	Great America	an Insurance Company	
as i filiteli At (fieremarter canca i filicipal), and	(Name of Surety)		
a corporation, or a Risk Retention Group estab	lished under the <u>Liability Risk Retention</u>	Act of 1986, Pub. L. 99-563, creat	ed and existing
under the laws of the State of Ohio (State)	(hereinafter called Surety), are	held and firmly bound unto the l	United States of
America in the sum of \$75,000 for a broker or theirs, executors, administrators, successors, an			ourselves and our
WHEREAS, the Principal is or intends to become			C 13004 and
the rules and regulations of the Federal Motor	The state of the s	and the same of th	
of motor carriers and shippers, and has elected			
financial responsibility and the supplying of tr			
agreements, or arrangements therefore, and			•
WHEREAS, this bond is written to assure comp	liance by the Principal as either a license	d Broker or a licensed Freight For	rwarder
of Transportation by motor vehicle with 49 U.S			
Administration, relating to insurance or other			
any and all motor carriers or shippers to whom			
NOW, THEREFORE, the condition of this obligation	tion is such that if the Principal shall pay	or cause to be paid to motor care	riers or shippers
by motor vehicle any sum or sums for which th		-	• •
perform, fulfill, and carry out all contracts, agree			
supplying of transportation subject to the ICC	Termination Act of 1995 under license is:	sued to the Principal by the Fede	eral Motor Carrier
Safety Administration, then this obligation sha	all be void, otherwise to remain in full for	ce and effect.	
The liability of the Surety shall not be discharg	ed by any payment or succession of payr	ments hereunder, unless and unt	il such payment
or payments shall amount in the aggregate to			
the amount of said penalty. The Surety agrees	to furnish written notice to the Federal M	Notor Carrier Safety Administration	on forthwith of all
suits filed, judgements rendered, and paymen	ts made by said Surety under this bond.		
This bond is effective the 26th day of _	May , 2021 , <sub>12:0</sub>	01 a.m., standard time at the add	ress of the
Principal as stated herein and shall continue in	force until terminated as hereinafter pro	ovided. The Principal or the Suret	y may at any time
cancel this bond by written notice to the Fede			
become effective thirty (30) days after actual re			
Motor Carrier and Broker Surety Bond. The Sur			
which arise as the result of any contracts, agre-	ements, undertakings, or arrangements r	made by the Principal for the sup	plying of
transportation after the termination of this bo			
hereunder for the payment of any such damage	ges arising as the result of contracts, agre	ements, or arrangements made l	by the Principal
for the supplying of transportation prior to the	e date such termination becomes effective	/e.	

FORM BMC-84 Page 1 of 2

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.

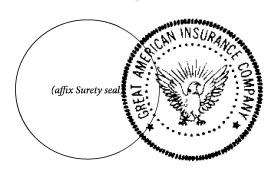
The receipt of this filing by the FMCSA certifies that a Broker Surety Bond has been issued by the company identified above, and that

FORM BMC-84 Revised 05/19/2017

OMB No.: 2126-0017

IN WITNESS WHEREOF, the said Principal and Surety have executed this instrument on the 26th day of May, 2021.

PRINCIPAL			SURETY							
BRILLI	IANT SHIPP	ING LLC	Great American Insurance Company							
COMPANY NAME			COMPANY NAME							
934 STUYVESANT AVE S	STE 3	UNION	301 E	CINCINNATI						
STREET ADDRESS		CITY	STREET ADDRESS							
New Jersey	07083	(973) 517-1959	Ohio	45202	(215) 766-1990					
STATE	ZIP CODE	TELEPHONE NUMBER	STATE	ZIP CODE	TELEPHONE NUMBER					
			John D. Weisbrot , Attorney-in-Fact							
(type or pr	int Principal officer's	name and title)	(type or print Principal officer's name and title)							
(I	Principal officer's sign	nature)	(Principal officer's signature)							
	ype or print witness's	name)	(type or print witness's name)							
	(witness's signatur	re)	(witness's signature)							



Filings must be transmitted online via the Internet at <a href="http://www.fmcsa.dot.gov/urs">http://www.fmcsa.dot.gov/urs</a>.

## (Rev. October 2018) Department of the Treasury

### **Request for Taxpayer Identification Number and Certification**

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

Internal	Revenue Service	•	Go to www.irs.go	v/FormW9 for inst	ructions and the late	est inforn	mati	ion.									
	The state of the s	- The second of	communication of a second state when	quired on this line; do	not leave this line blank												
	Brilliant S	rilliant Shipping LLC															
	2 Business name/e	disregarded entity	name, if different from	n above										7/7			
	Brilliant Shipping LLC																
page 3	3 Check appropriate following seven	of the	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):														
s on p	Individual/sol	al/sole proprietor or C Corporation S Corporation Partnership Trust/estate												nv)			
Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership)									Exempt payee code (if any)								
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-me								wner. Do not check owner of the LLC is gle-member LLC that						kemption from FATCA reporting ode (if any)			
_ ≝	_		should check the appr	ropriate box for the ta	x classification of its own	ner.			/A/							0.1	
be	Other (see ins		or suite no.) See instru	uotiono		Request	tor's	nama	0.000	es to ac	_			utside	the U.S	S.)	
ee S			Suite 3 Lowe			nequest	iei S	name a	nu a	Jules	s (opi	ionai	,				
S	6 City, state, and 2					1											
		, <b>NJ</b> 07083															
	7 List account num	nber(s) here (option	nal)														
	_			(TOTAL D.)													
Par			ation Number				80	aiol nos	urita	num	hor					_	
					e given on line 1 to av ber (SSN). However,		50	cial sec	urity	num	Der	1 [	_			=	
reside	nt alien, sole prop	rietor, or disrega	arded entity, see th	e instructions for F	Part I, later. For other				-	-		-					
	Contract to the State of the Contract of the C	yer identificatior	n number (EIN). If y	ou do not have a n	umber, see How to ge				_			l l					
TIN, la		a mara than ana	nome see the inc	turations for line 1	Alas ass M/bat Nama	a [	or	ployer	iden	ificat	ion r	umb	er		_		
			elines on whose nu		Also see What Name	anu [				T	Т						
		,					8	6	- 3	9	3	8	3	1	1		
Par	Certific	cation		,						_							
ALCOHOL: NAME OF TAXABLE PARTY.	penalties of perju				-											_	
				dentification numb	er (or I am waiting for	a numbe	er to	be iss	ued	to m	e): ar	nd					
2. I an Ser	not subject to ba	ckup withholdir n subject to bac	ng because: (a) I an kup withholding as	n exempt from bac	kup withholding, or (be to report all interest	) I have r	not l	been n	otifie	d by	the I	Inter					
			on (defined below);	and													
					t from FATCA reporti	na is corr	ect.										
					tified by the IRS that y				ect t	o bad	ckup	with	hold	ina l	oeca	use	
you ha	ve failed to report a	all interest and di ent of secured pr	lividends on your tax roperty, cancellation	return. For real esta of debt, contribution	ate transactions, item a ons to an individual reti ut you must provide yo	2 does no rement ar	t ap	ply. Fo	r mo (IRA	rtgag ), and	je inte d ger	erest nerall	pai y, p	d, aym	ents		
Sign Here	Signature of U.S. person ▶	Rick	hlutox	D		Date ►	(	6/14	21								
Ger	neral Instr	uctions			• Form 1099-DIV (d funds)	lividends,	inc	luding	thos	e fro	m ste	ocks	or	mutı	ual		
Section noted.		o the Internal Re	evenue Code unles	s otherwise	Form 1099-MISC proceeds)	(various 1	type	es of in	com	e, pri	zes,	awa	rds,	or ç	gross	S	
related	uture developments. For the latest information about developments elated to Form W-9 and its instructions, such as legislation enacted fter they were published, go to www.irs.gov/FormW9.																
			s.gov/Foillivva.		• Form 1099-S (pro												
	oose of For				• Form 1099-K (me				1000								
inform	ation return with t	he IRS must obt	ster) who is require tain your correct ta	xpayer	<ul> <li>Form 1098 (home 1098-T (tuition)</li> </ul>	mortgag	je in	iterest)	109	8-E	stud	ent l	oan	ınte	erest)	),	
	dentification number (TIN) which may be your social security number  • Form 1099-C (canceled debt)																
(3311),			number (1111v), ado		<ul> <li>Form 1099-A (acq</li> </ul>	uisition o	r ab	andon	men	of s	ecur	ed pr	ope	erty)			

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.

Use Form W-9 only if you are a U.S. person (including a resident

alien), to provide your correct TIN.

Cat. No. 10231X

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)

**SJONES** 

# DATE (MM/DD/YYYY)

#### CERTIFICATE OF LIABILITY INSURANCE

3/29/2022

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 have ADDITIONAL INSURED provisions or be endorsed.

	SUBROGATION IS WAIVED, subjecting certificate does not confer rights to				ch end	orsement(s)		require an endorsemen	τ. Α:	statement on	
PRODUCER					CONTACT Michelle Francis						
NASTC Insurance Services LLC 2054 Nashville Pike			PHONE (A/C, No, Ext):  E-MAIL ADDRESS: michelle.francis@nastc.com								
Gal	latin, TN 37066				ADDRE:	<sub>ss:</sub> michelle	.francis@n	astc.com			
						INS	SURER(S) AFFOR	RDING COVERAGE		NAIC #	
				INSURE		14484					
INSU	JRED				INSURE	RB:					
	Brillant Shipping LLC				INSURE	RC:					
	934 Stuyvesant Ave LWR LV	L S1	E 3		INSURE	RD:					
	Union, NJ 07083				INSURE	RE:					
					INSURE	RF:					
СО	VERAGES CER	TIFIC	CATE	NUMBER:				REVISION NUMBER:			
IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY REPRIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUI PER	REMI TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORI	N OF A	NY CONTRAC	CT OR OTHER IES DESCRIB	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T	CT TO	O WHICH THIS	
INSR			SUBR		DELINI	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	c		
A A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	FOLICT NOWIBER		(MM/DD/YYYY)	(MM/DD/YYYY)		-	1,000,000	
	CLAIMS-MADE X OCCUR			GTUL001108-00		4/1/2022	4/1/2023	EACH OCCURRENCE DAMAGE TO RENTED	\$	100,000	
	SB time to the A			G102001100-00		4/1/2022	4/1/2023	PREMISES (Ea occurrence)	\$	5,000	
								MED EXP (Any one person)	\$	1.000.000	
								PERSONAL & ADV INJURY	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:  POLICY PRO- JECT LOC							GENERAL AGGREGATE	\$	2,000,000	
								PRODUCTS - COMP/OP AGG	\$	2,000,000	
Α	OTHER:							COMBINED SINGLE LIMIT	\$		
^	AUTOMOBILE LIABILITY			GTUL001108-00		4/1/2022	4/1/2023	(Ea accident)	\$		
	ANY AUTO OWNED SCHEDULED			G10L001108-00		4/1/2022	4/1/2023	BODILY INJURY (Per person)	\$		
	AUTOS ONLY AUTOS							BODILY INJURY (Per accident) PROPERTY DAMAGE			
	HIRED AUTOS ONLY Contingent Auto							PROPERTY DAMAGE (Per accident)  Per Occ/Agg	\$	1,000,000	
									\$	1,000,000	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$		
	00000000000000000000000000000000000000							AGGREGATE	\$		
	DED RETENTION \$							PER OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							STATUTE   ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDENT	\$		
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE			
Α	DÉSCRIPTION OF OPERATIONS below  Contingent Cargo			GTUL001108-00		4/1/2022	4/1/2023	E.L. DISEASE - POLICY LIMIT  Ded \$2,500	\$	100,000	
A	Contingent Cargo			9102001100-00		4/1/2022	4/1/2023	Deu \$2,500		100,000	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC						re space is requir	red)			
Con	tingent Auto Liability, Per Occurrence: \$	\$1,00	0,000	Aggregate: \$1,000,000 De	eductibi	e: \$5,000					
CE	RTIFICATE HOLDER				CANO	ELLATION					
	For Information Only Contact: NASTC Insurance S 844-264-8500 Fax: 615-451-9		ces		THE	EXPIRATION	N DATE TH	ESCRIBED POLICIES BE C. IEREOF, NOTICE WILL EY PROVISIONS.			
	Gallatin, TN 37066	J 10			AUTHO	RIZED REPRESE	NTATIVE	<i>x</i> 0			
						James Q. Owen					

ACORD 25 (2016/03)

ACORD

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January 12, 2022

RICK DUBOIS BRILLIANT SHIPPING LLC 934 STUYVESANT AVE STE 3 UNION, NJ 07083

#### CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) ASSIGNMENT

The Standard Carrier Alpha Code of **BSLE** has been assigned to:

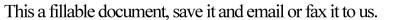
BRILLIANT SHIPPING LLC 934 STUYVESANT AVE STE 3 UNION, NJ 07083 MC-1251531 US DOT- 3641548

This Alpha Code will apply only to the company name shown above through June 30, 2023. Approximately two months prior to expiration of this SCAC, NMFTA will provide an invoice for renewal which must be promptly returned together with payment to ensure its continued validity. Should the company name, address or contact information need an update, please notify the National Motor Freight Association, Inc. at customerservice@nmfta.org.

If you participate in the Customs & Border Protection (CBP) ACE program and you have an issue with using your SCAC with ACE, please contact CBP at the following email address: AMSSCAC@cbp.dhs.gov. All SCACs are automatically uploaded to ACE within 24 hours. To participate in the Automated Export System (AES) program, please email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request, along with a copy of the NMFTA SCAC letter, to enable your SCAC for AES. Additional information on CBP's automated programs can be found at: https://www.cbp.gov/trade/automated/getting-started.

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, tariffs, etc.

NOTICE: Assignment 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.





### **Brilliant Shipping LLC**

934 Stuyvesant Ave., Ste 3 Lower Level, Union, NJ 07083 **P** 973.494.5652 | **F** 973.494.5675

www.shipbrilliant.com credit@shipbrilliant.com

#### Information Sheet

Company Name		Email address						
Street Address (or Billing Address if different)		Phone Number						
City, State, Zip Code		Fax Numbe	<u> </u>					
<b>Business Information</b>								
Nature of Business:  Is Business Seasonal? If Yes, indicate peak seasor Business Organization (Please check one only): Sole Proprietor		In Bus ine	ss Since:					
Is Business Seasonal? If Yes, indicate peak seasor Business Organization (Please check one only): Sole Proprietor	1:		1199. 0					
Payment Information (Please check one only): Sole Proprietor	- Partnership - C	orporation Limited I	Liability Co -					
Payment Contact:	Payment Em	ail·						
Payment Phone (if different than above):	r ay mone zara	Fax:						
Is Bill of Lading/POD required for freight bill payment? Special Billing Instructions:	Yes No _							
Banking Information								
	Cont	tactName:						
Name of Bank:Street Address:	Phor	ne/Fax:	/					
City, State, Zip:	Acc	ount Number:						
Trans portation References (Attach additional pages if necess			/					
1Name of Company	Contact	Phone	Fax					
2. Name of Company	Contact	Phone	Fax					
Applicant herein certifies that the information contained herein is to of the entity named above ("Applicant"). Applicant hereby authorize from the bank, trade, transportation and credit references listed ab applicants payment history and to report credit information to oth due within thirty (30) days from the date of an invoice. You agree to days from the date of an invoice shall accrue interest at a rate of 1.0 expenses, including, but not limited to, attorney fees and court cost whether any such attorney fees or expenses are incurred with, with prior to or after entry of a judgment. All transactions and dealings and where applicable, federal law. Applicant further waives and agriforum, lack of personal jurisdiction, or similar doctrine for actions of Applicant further agrees not to back solicit or tender loads directly directly for the Applicant. Applicant agrees that any and all claims freight, will be directed to and asserted directly to the Carrier arran contract Carriers will have a minimum of \$100,000 cargo insurance will offer additional cargo claim coverage up to ten thousand dolla actions while they have care, custody and control of the Applicant's specified in writing and accepted by both parties. BS liability is limit Delay claims, in any event, shall be limited to a maximum of an ame event premium on-time service is required, Applicant will provide to of the load, that details the costs to the shipper of any late delivery	tes Brilliant Shipping LLC pove and credit reporting ers. It is understood and o settle invoices within 3 0% per month. It is furth its that may become nec out, before or after com between BS and Applica rees not to assert any de commenced by BS in suc to the carriers that BS a for loss or damage to ca ged by BS. BS will facilit. . BS, who is acting in all .rs, on top of the Carrier's is freight. The Carrier's list ted to fifty cents per pot ount equal to one hunds written notice of Foresee	C ("BS") or any of its agent g companies as BS deems agreed that all freight or 10 days. Any such charges er agreed that the Applications are series as a companies and the Application of formal properties are agreed that the Application of formal properties are agreed that the Application of formal properties are all be governed by the fense based upon jurisdict courts. Applicant further anges to haul, nor allowing or theft of cargo and attend all claims and actions are spects pertaining heretors \$100,000 cargo insurance ability for cargo is \$100,000 cargo insurance all claims are dollars per day by which all cargo is \$100,000 cargo insurance ability for car	s to obtain credit information necessary to determine other charges billed by BS are not paid to BS within thirty (30) ant shall pay any collection of payment from Applicant, breedings or any lawsuit incurred ne laws of the State of New Jersey, ation, venue, inconvenience of a waives any right to a jury trial, such carriers to haul freight any claims for delay in delivery of on behalf of Applicant. BS as an interstate property broker, are. Carrier is fully liable for its 0, or other pre-arranged amount illity limit of ten thousand dollars.					
Sign:	Title:	Da	ate:					
Your Name:	Agent Na	me:						
What are your shipping hours?								



# 2022 UCR Registration is VALID!



Confirmation # 000-0321-5282

Generated: 03/10/2022 23:21 EST

Registered on: 03/10/2022 23:21 EST

**Year:** 2022

UCR Fee: \$59.00

Paid: Convenience Fee: \$1.75

Total: \$60.75

**Bracket:** 0 to 2 vehicles [0 vehicle(s)]

**USDOT #:** 3641548

Classifications: Broker

Legal Name: BRILLIANT SHIPPING LLC

Base State: US\_NY

934 STUYVESANT AVE STE 3

Principal: UNION, NJ 07083

US

Payor: Rick dubois

\*\*\* Expires: 12/31/2022 \*\*\*



## **Business Operations started December 2020**

EIN: 86-3938311 D&B: 11-319-2466

Phone: (973) 494-5652 Fax: (973) 494-5675

**Remit Address:** 

934 Stuyvesant Ave. Ste 3 Lower Level Union, NJ 07083

**Accounts Receivable:** 

General Inquiries info@shipbrilliant.com (973)494-5815

**Correspondence:** 

934 Stuyvesant Ave. Ste 3 Lower Level, Union, NJ 07083

**AccountsPayable:** 

FullTruckload ap@shipbrilliant.com (973)494-5815

Less Than Truckload ap@shipbrilliant.com (973)494-5815