

Valued Customer,

Thank you for taking the time to fill out these necessary documents so that we can begin a great working relationship together.

Everyone at JDM Logistix Inc knows how important it is that we meet and exceed your expectations and make seamlessly moving your goods as quick and easy as possible. We will consistently focus on providing the highest level of service and expertise in supplying your company with detailed communication and nothing but on-time performance

If you have any questions about the enclosed documents, or would like to offer your suggestions for how we can serve you better, please feel free to contact me personally.

I look forward to working together. Alex Kragovic

JDM Logistix, Inc.

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Phone: 708-467-9100 Fax: 708-688-1116

~H



COMPANY INFORMATION

Business Started in 2016

Incorporated in 2016

Mailing & Remit to Address:

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Physical Address:

16w455 S Frontage rd Suite 115 Burr Ridge IL 60527

Phone: 708-467-9100

Credit: Fax 708-688-1116

Email: credit@jdmlogistix.com

Principals:

Alex Kragovic CEO - alex@jdmlogistix.com

Anna Aleksic-VP- anna@jdmlogistix.com

Logistics

Federal ID # 81-1570804

SCAC Code JDMG

ICC Contract Carrier Authority

ICC Broker Authority MC-958152

Terms of Payments 7 Day Terms

To make payment easier and more convenient for our customers, we encourage payment via ACH and wire transfers. If you would like to take advantage of either of these convenient payment methods, please contact Anna Aleksic at banking@jdmlogistix.com for complete instructions.



APPLICATION FOR CREDIT

We request your cooperation in completing and returning this form to us as soon as possible so that we can establish a line of credit for your company. Also, please forward a copy of your most recent financial statements to assist us in this process. All information will be held in strict confidence.

Legal Name		Telephone #_	
Trade Name (dba)		Fax #	
Billing Address			
Nature of Business			
Branch () or subsidiary () of:	DUNS	
Type of organization: Cor	rporate () Partnership () (Other()	
Federal Tax #	(for Corpor	ration) Year Established	d
Accounts Payable Contac	t	Telephone #	
Fax #	Email#		
	<u>B</u>	ank Reference	
Name	Checking A	.ccount #	
City/State	Telephone #	Email	
	<u>Trade Reference</u>	ces (Transportation Rela	<u>nted)</u>
CompanyName 1	2	3	
Contact Name			
Telephone #			
Email			
•	STIX. Credit terms are und		rences listed above to release credit infrom invoice date. Applicant's signa-
Signature	Print Name	Title	Date Salesperson:

E-mail completed form to credit@jdmlogistix.com or fax to 708-688-1116, Attn: Credit



JDM LOGISTIX INC.

Telephone 708-467-9100 Fax 708-688-1116 Email Credit@jdmlogistix.com

CUSTOMER PROFILE

Legal Name:	Billing Address:					
Trade Name:	City:					
Physical Address:	State:Zip:					
City, State, Zip:	What other documents do you require with your invoice?					
Year Established:	POD() Rate Confirmation() Receipts()					
DUNS #:	Other					
Payables Contact:	What information is required on you invoice?					
Telephone:						
Fax:	What is required for accessorial charges?					
Email:						
Type of Organization:	How would you like to receive your invoice? (email preferred)					
Corporate () Partnership ()	Email:					
Other ()	Other _ If you have special requirements or					
Payment Terms:	websites to upload invoices, please attach instructions					
If you offer ACH/EFT, please attach form.						
Please attach your FSC Table. Please complete the						
attached credit application or attach your credit						
reference sheet and signed credit application.	Main Contact:					
Company Business Type:	Direct Line:					
Shipper () Consignee () Broker ()	Cell:					
Product Description:	Fax:					
Operations Manager:						
Main Telephone:						

Rates: Negotiated () Contracted ()
Preferred Method of Tendering Load Confirmations: Telephone () Fax () Email () EDI ()
EDI? YES() NO()
If yes, Transaction Required?
Load Tenders 204 () Load Tender Response 990 () Shipment Status 214 () Invoicing 210 ()
Functional Acknowledgement 997 () Other ()
Average Value of Load?
Amount of Cargo Insurance required (over \$100,000)
Amount of Liability Insurance required (over \$500,000)
Typical Lead Time?
Average Weight of Load?
Type of Equipment and Length Required?
Mileage System to Be Used and Version
Does your Business Have Seasonality to it? YES () NO () If Yes, When?
Primary Shipping Areas From/To: Midwest () West Coast () Southeast () East Coast ()
Average Number of Shipments per Week?
Average Stop-Offs, if Any?
Is There a Lumper Service Available? YES () NO ()
Driver Assist Loading Product? YES() NO()
Driver Assist Unloading Product? YES() NO()
Pre Authorization? YES () NO ()
Shipping and Receiving Hours?
Pallet Exchange? YES () NO ()
Average Number of Pallets per Load?

How Much Do You Charge For Pallets?
Slip Sheet?
Load Locks?
Shipper Load and Count?
Driver Allowed on Docks? YES() NO()
Does the Driver Have to Verify the Count? YES() NO() Circle One: Piece Count: Pallet Count:
Is This a Shipper Sealed Facility? YES() NO()
Average Time to Load/Unload
Typical Delivery Time? A.M. Only () P.M. Only () Any Time ()
Are We Required to Make Appointments? YES() NO()
Comments



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

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

SERVICE DATE April 14, 2016

LICENSE MC-958152-B U.S. DOT No. 2860202 JDM LOGISTIX INC BURR RIDGE, IL

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

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Information Technology Operations Division



April 04, 2016

ALEKSANDAR KRAGOVIC JDM LOGISTIX INC 16W455 S FRONTAGE RD BURR RIDGE, IL 60527

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) ASSIGNMENT

The Standard Carrier Alpha Code of JDMG has been assigned to:

JDM LOGISTIX INC 16W455 S FRONTAGE RD BURR RIDGE, IL 60527 MC-958152 US DOT- 958152

This Alpha Code will apply only to the company name shown above through June 30, 2017. 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 or address change, please notify the National Motor Freight Association, Inc. at the address below. If you participate in the Bureau of Customs & Border Protection ACE, AMS, CAFES, FAST or PAPS programs, it is your responsibility to ensure that a copy of this letter is forwarded (email preferred) to the following address:

CBP SCAC Processing Bureau of Customs and Border Protection 8444 Terminal Road, Beauregard (A-105.5) Lorton, VA 22079 AMS.SCAC@DHS.GOV

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

Form W-9 Plan. December 2014)

. Form 1099-INT (interest earned or paid)

Form 1099-DN (dividends, including those from stocks or mutual funds)
Form 1099-MSDC (various types of income, prizes, awards, or gross proceeds)
Form 1099-B (stock or mutual fund sales and certain other transactions by brokens)
Form 1099-B (proceeds from real estate transactions)
Form 1099-B (merchant card and third party network transactions)

Request for Taxpayer Identification Number and Certification

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

	1 Name (as shown on your income tax return). Name is required on this line; do	o not leave this line blank.										_	
	JDM LOGISTIX INC												
ri.	2 Business name/dangarded entity name, if different from above												
eged no													
	Check appropriate box for federal fax classification; check only one of the following seven boxes: Individual/sole proprietor or				Trust/estate 4 Exemptions (codes apply only certain entities, not individuals; se instructions on page 38: Exempt payee code if any!								
목욕	Limited liability company. Enter the tax classification (C+C corporation, S+S corporation, P+partnership) >												
Print or type pecific Instructions	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line the tax classification of the single-member owner.				e line above for Exemption from FATCA re code (if any)				nepo	ring			
2.2	☐ Other (see instructions) ▶				(Applies to economic mannered number the U.S.)								
- ĕ					ster's name and address (optional)								
ž	16W455 S FRONTAGE RD SUITE 115												
ě	6 City, state, and ZiP code												
8	BURR RIDGE IL 60527												
	7 List account number(s) here (optional)												
Par	Taxpayer Identification Number (TIN)	3 1 1 2 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2											
	your TIN in the appropriate box. The TIN provided must match the nan		The Party of the P	cial e	ecurity	num	ber						
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				П	Π.	. [Г	١.	Г	П	П		
	ss, it is your employer identification number (EIN). If you do not have a r			ш	╝.	L	L	J T	L				
TIN o	n page 3.		or										
	If the account is in more than one name, see the instructions for line 1	and the chart on page 4	for En	пріоуч	er iden	oficat	tion r	numi	her	_			
guide	lines on whose number to enter.		8	1	- 1	5	7	0	8	0	4		
_			-			Ľ	Ľ	Ľ	_	Ľ	-		
Par													
	r penalties of perjury, I certify that:												
1. Th	e number shown on this form is my correct taxpeyer identification num	iber (or I am waiting for a	number t	to be	ssued	to m	MI: I	and					
Se	m not subject to backup withholding because: (a) I am exempt from be rvice (IRS) that I am subject to backup withholding as a result of a failu longer subject to backup withholding; and												
3. Ia	m a U.S. citizen or other U.S. person (defined below); and												
	e FATCA code(s) entered on this form (if any) indicating that I am exemp	pt from FATCA reporting	is correct	į.									
	fication instructions. You must cross out item 2 above if you have been				ntly su	biect	tot	back	uni	view	volction	ė.	
becar intere gener	use you have failed to report all interest and dividends on your tax retur- est paid, acquisition or abandonment of secured property, cancellation- cities, payments other than interest and dividends, you are not required to closes on page 3.	 For real estate transac of debt, contributions to 	tions, iten an individ	m 2 di lual re	oes no direme	t app	ply. I	Far r	mort ent (gag PW)	and	-	
Sign	Signature of			11	11.								
Hen		Date		4	14	Π	Y						
Ger	neral Instructions	Form 1098 (home mort) (bullion)	gage intere	eG. 10	98-E (s	tuder	e loa	n inti	ervat	b. 10	18-T	_	
	in references are to the Internal Revenue Code unless otherwise noted.	. Form 1099-C (canceled	(debt)										
	 developments. Information about developments affecting Form W-9 (such islation enacted after we release it) is at www.irs.gov/fied. 	 Form 1099-A (acquisition or abandonment of secured property) 											
	pose of Form	Use Form W-9 only if y provide your correct TIN.		5. per	non-(in	dudin	g a r	neide	ent a	iter).	to.		
	Evidual or entity (Form W-9 requester) who is required to file an information	If you do not return For	m W-9 to 1							ht be	subje	er	
return	with the IRS must obtain your correct taxpayer identification number (TIN)	to beckup withholding. 5			p with	oldin	g? or	pag	pe 2.				
	which may be your social security number (55%), individual taxpayer identification. By signing the filled-out form, your number (fills), adoption taxpayer identification number (fills), adoption taxpayer identification number (fills).												
identif	interest of the common appayer or an information return the amount paid to join or other amount reportable on an information return the amount paid to join, or other amount reportable on an information return. Examples of information to be issued.												
returns include, but are not limited to, the following: 2. Certify that you are not subject to backup withholds:					ding.	or.							

2. Certify that you are not subject to because withholding, or 3. Claim exemption from beckup 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.