

State of Indiana
Office of the Secretary of State

Certificate of Organization
of
M ANGO EXPRESS LOGISTICS, LLC

I, DIEGO MORALES, Secretary of State, hereby certify that Articles of Organization of the above Domestic Limited Liability Company have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

NOW, THEREFORE, with this document I certify that said transaction will become effective Thursday, February 08, 2024.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, February 09, 2024.

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

202402081763777 / 10215612

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>



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

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

SERVICE DATE
March 15, 2024

LICENSE
MC-1619623-B
U.S. DOT No. 4199119
MANGO EXPRESS LOGISTICS LLC
D/B/A MANGO EXPRESS LOGISTICS
BROWNSBURG, IN

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.

A handwritten signature in blue ink that reads "Jeffrey L. Secrist".

Jeffrey L. Secrist, Division Chief
Office of Registration

BPO

USDOT Number: _____ Date Received: _____

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.



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, **MANGO EXPRESS LOGISTICS LLC**
(Name of Broker or Freight Forwarder)
 of **8833 N COUNTY ROAD 650 E** **BROWNSBURG** **IN** **46112**
(Street) (City) (State) (Zip)
 as PRINCIPAL (hereinafter called Principal), and **Lexington National Insurance Corporation**
(Name of Surety)

a corporation, or a Risk Retention Group established under the [Liability Risk Retention Act of 1986, Pub. L. 99-563](#), created and existing under the laws of the State of **Florida** (hereinafter called Surety), are held and firmly bound unto the United States of

America in the sum of \$75,000 for a broker or freight forwarder for which payment, well and truly to be made, we bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

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 settlements, judgments rendered, and payments made by said Surety under this bond.

This bond is effective the **11th** day of **March**, **2024**, 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, DC, 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 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 7th day of March, 2024.

PRINCIPAL

MANGO EXPRESS LOGISTICS LLC

COMPANY NAME		
8833 N COUNTY ROAD 650 E	BROWNSBURG	
STREET ADDRESS		
IN	46112	(317) 403-8310
STATE	ZIP CODE	TELEPHONE NUMBER

(type or print Principal officer's name and title)

(Principal officer's signature)

(type or print witness's name)

(witness's signature)

SURETY

Lexington National Insurance Corporation

COMPANY NAME		
Post Office Box 6098	Lutherville	
STREET ADDRESS		
MD	21094	4106250800
STATE	ZIP CODE	TELEPHONE NUMBER

(type or print Principal officer's name and title)

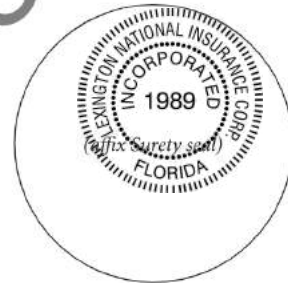
David Gonsalves

(Principal officer's signature)

Nick Brady

(type or print witness's name)

(witness's signature)



Bond Filed Electronically

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

POWER OF ATTORNEY

Lexington National Insurance Corporation

Lexington National Insurance Corporation, a corporation duly organized under the laws of the State of Florida and having its principal administrative office in Baltimore County, Maryland, does hereby make, constitute and appoint:

David Gonsalves and Jackson Cromer

as its true and lawful attorney-in-fact, each in their separate capacity, with full power and authority to execute, acknowledge, seal and deliver on its behalf as surety any bond or undertaking of \$6,000,000 or less. This Power of Attorney is void if used for any bond over that amount.

This Power of Attorney is granted under and by authority of the following resolutions adopted by the Board of Directors of the Company on February 15, 2018:

Be it Resolved, that the President, CEO or any Vice-President shall be and is hereby vested with full power and authority to appoint suitable persons as Attorney-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

Attorney-in-Fact may be given full power and authority for and in the name of and on the behalf of the Company, to execute, acknowledge and deliver any and all bonds, contracts, or indemnity and other conditional or obligatory undertakings, including any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts, and any all notices and documents cancelling or terminating the Company's liability thereunder and any such instruments so executed by any Attorney-in Fact shall be binding upon the Company as if signed by the President and sealed by the Corporate Secretary.

RESOLVED further, that the signature of the President, CEO or any Vice-President of LEXINGTON NATIONAL INSURANCE CORPORATION may be affixed by facsimile to any power of attorney, and the signature of the Secretary or any Assistant Secretary and the seal of the Company may be affixed by facsimile to any certificate of such power, or any such power or certificate bearing such facsimile signature or seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed with respect to any bond to which it is attached continue to be valid and binding upon the Company.

IN WITNESS WHEREOF, the Company have caused this instrument to be signed and their corporate seal to be hereto affixed.



Ronald A. Frank, CEO



State of Maryland
County of Harford County, SS:

Before me, a notary public, personally appeared, Ronald A. Frank, Chief Executive Officer of Lexington National Insurance Corporation, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under the PENALTY of PERJURY under the laws of the State of Maryland that the foregoing paragraph is true and correct.

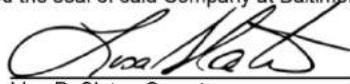
WITNESS my hand and official seal.

Commission Expires: 05/23/24


Notary

I, Lisa R. Slater, Secretary of Lexington National Insurance Corporation, do hereby certify that the above and foregoing is true and correct copy of a Power of Attorney, executed by said company, which is still in full force and effect; furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Company at Baltimore, Maryland this 15th day of December, 2023.



Lisa R. Slater, Secretary

Attached to bond signed this 7th day of March, 2024



April 12, 2024

To Whom It May Concern:

This letter is to inform you that Yvel Guelce, from Mango Express Logistics, LLC, has a business checking account with Middlesex Federal Savings, the affiliated bank of Novo. Information regarding the account is as follows:

- Business Name: Mango Express Logistics, LLC
- Routing Number: 211370150
- Account Number: 102351426
- Business Address: 8833 N County Road 650 E, Brownsburg, IN 46112
- Account Opened: February 23, 2024

Regards,

A handwritten signature in blue ink that reads "Edite Bettencourt".

Edite Bettencourt
Business Banking Manager
Middlesex Federal Savings, F.A.
Team Novo
edite@novo.co

CONFIDENTIALITY NOTICE: This communication is intended only for the use of the individual or entity to which it is addressed and contains or may contain information that is privileged, confidential or exempt from disclosure under applicable law. If the reader of this communication is not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please disregard and destroy this communication and do not disseminate or retain any copy of this communication.

**Request for Taxpayer
Identification Number and Certification**

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

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=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

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) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions. Requester's name and address (optional)

6 City, state, and ZIP code

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.

Social security number

			-			-						
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or

Employer identification number


		-											
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Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ▶ 2/22/24

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.



BROKER CREDIT REFERENCE LETTER

ATTN: ACCOUNTS PAYABLE OR CREDIT TEAM

To whom it may concern:

We are pleased to inform you that the company listed below is currently working with OperFi to provide them with the working capital and resources to help their freight brokerage operation. OperFi will assist to ensure that vendor payments are issued according to terms, and you have direct contact with our AP team to receive payment updates and further details.

BROKER: Mango Express Logistics, LLC

MC#: 1619623

PHONE: +13172070019

EMAIL: info@mangoexpresslogistics.com

If you have any questions, please reach out to our accounting team.

888-673-7349

accounting@operfi.com

Please verify the active status of our Broker Client by visiting:

<https://operfi.com/operfi-active-brokers>

Sincerely,

A handwritten signature in black ink, appearing to read 'Tom Croteau', is written over a white background.

Tom Croteau

President & CEO

Operation Finance, Inc.

682-330-7700

tcroteau@operfi.com



888-673-7349



info@operfi.com



www.operfi.com



610 Uptown Blvd. , Suite 2000
Cedar, Hill, TX 75104



CERTIFICATE OF ASSIGNMENT

For Standard Carrier Alpha Code™ (SCAC®)

SCAC	MATN
Assigned Date	Tuesday, 05 March 2024
Assigned To	MANGO EXPRESS LOGISTICS 8833 N COUNTY ROAD 650 E BROWNSBURG, IN USA 46112 16196231 4199119
Expiration Date	Wednesday, 05 March 2025



SCAC Assignment

This SCAC only applies to the company name shown above through the expiration date. Renewal notices are sent approximately three months prior to expiration of this SCAC. A successful renewal must be made prior to the expiration date to ensure its continued validity. For easy renewal, go to <https://scaccode.com>.

To update the company name, address, or contact information affiliated with this SCAC, please contact NMFTA Customer Service at customerservice@nmfta.org or (703) 838-1810.

Refer to our Terms of Sale at <https://nmfta.org/terms-of-sale> for additional information regarding our policies governing the handling and administration of a SCAC.

SCACs Ending in "U"

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

U.S. Customs and Border Protection (CBP) Automated Commercial Environment (ACE) Program Participants

All SCACs are automatically uploaded to ACE within 24 hours. If participating in the U.S. Customs and Border Protection (CBP) ACE program, contact CBP at AMSSCAC@cbp.dhs.gov if you have an issue when using your SCAC with ACE. To participate in the Automated Export System (AES) program, email AMSSCAC@cbp.dhs.gov and askaes@census.gov with your request and attach a copy of this NMFTA SCAC Certificate. For additional information on CBP's automated programs, go to <https://www.cbp.gov/trade/automated/getting-started>

National Motor Freight Classification (NMFC) Participation and NMFTA Membership

A SCAC assignment is not related to the participation in the National Motor Freight Classification (NMFC), and it does not allow for the use of the NMFC in connection with freight rates. In addition, a SCAC assignment does not grant membership in the National Motor Freight Traffic Association, Inc. For assistance, please contact NMFTA Customer Service at customerservice@nmfta.org or (703) 838-1810.



2024 UCR Registration is VALID!



Confirmation # 000-0464-0234

Registered on: 03/04/2024 09:28 EST

Generated: 03/04/2024 09:28 EST

Year: 2024

Paid:	Date	Bracket	UCR Fee	Conv. Fee	Total
	03/04/2024	Bracket 1 [0 veh.]	\$37.00	\$1.00	\$38.00

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

USDOT #: 4199119

Classifications: Broker

Legal Name: MANGO EXPRESS LOGISTICS LLC

DBA: MANGO EXPRESS LOGISTICS

Base State: Indiana

Principal: 8833 N COUNTY ROAD 650 E
BROWNSBURG, IN 46112
US

Payor: DOT FILING AND COMPLIANCE

*** Expires: 12/31/2024 ***