

**Bill to:**

Primo

,  
,  
,

Invoice Date: 08/16/2023

Invoice #: 1779514

Terms: NET 30

Due Date: 09/16/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/14/2023		Justin, TX 76247, USA - 1301 Devon Ave, Bensenville, IL, USA			
			1	1375	1375

<b>TOTAL</b>
1375

**PLEASE NOTE**

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below.

Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

**COMPASS FUNDING SOLUTIONS LLC**

**P.O.BOX 205154**

**DALLAS, TX 75320-5154**

**Tel: 844-899-8092**



**Logistics Freight Solutions Inc**  
**PO BOX 227008**  
**MIAMI, FL 33222**  
**Phone: (305) 909-7870**  
**ops1tl@heyprimo.com**

**Mailing Address**  
**Logistics Freight Solutions Inc DBA PRIMO**  
**PO BOX 227008**  
**MIAMI, FL 33222**  
**Phone: (305) 909-7870**

## Dispatch Information

For carrier reference only - not intended for shipper

### Carrier Information

**Name:** Royal3 INC  
**Phone:** (630) 485-7370  
**Fax:**  
**Contact:** Peter ext. 106  
**Equipment:** Dry Van 53'

**Motor Carrier#:** 944686  
**Quote#:**  
**Load#:** 1779514  
**Ship Date:** 08/14/2023  
**Ready:** 12:00 PM **Close:** 05:00 PM  
**Delivery Date:** 08/16/23 from 08:00 to 17:00

### Shipper Information

**Amazon - KTX1**  
 15716 WOLF XING BLDG E  
 JUSTIN, TX 76247  
 Phone: (832) 260-5327  
 Phone numbers provided for carrier convenience  
 Contact: KELLY LANIERO - Ph.: (832) 260-5327  
 Email: michelle.smith@ctdi.com, klaniero@ctdi.com

### Consignee Information

**APEX LOGISTICS**  
 1301 Devon Ave.  
 BENSENVILLE, IL 60106  
 Phone: (847) 786-3850  
 Phone numbers provided for carrier convenience  
 Contact: CASSIDY BURNS - Ph.: (847) 786-3850  
 Email:

**Shipper Ref#:** ORDAE2308151 - **Cnee Ref#:** ORDAE2308151

Additional Services:

**3RD PARTY BILL FREIGHT PREPAID TO:**  
**Logistics Freight Solutions Inc**  
**PO BOX 720637**  
**MIAMI, FL 33172**

### DESCRIPTION OF ARTICLES

QTY	TYPE	STC	SHORT DESCRIPTION	HZ	LEN	WID	HGT	STACK	NMFC	CLASS	ACT WT
1	PLT		KINDLES		47	40	42	-		250	150
1	PLT		KINDLES		40	48	50	-		85	700
1	PLT		KINDLES		51	43	33	-		92.5	425
1	PLT		KINDLES		51	42	33	-		85	500
1	PLT		KINDLES		48	40	16	-		250	50
1	PLT		KINDLES		45	40	42	-		100	400
<b>TOTAL:</b>				<b>6</b>							<b>2225 LB</b>

### Carrier Charge:

**Freight Charge Cost** \$ 893.00  
**Fuel Surcharge Cost** \$ 482.00  
**Total:** **\$1,375.00**

### Additional Notes:

APEXKINDLETRANSFERS

### SEE NEXT PAGE FOR PAYMENT INSTRUCTIONS

**Please respond back with pickup number via Email: mrestrepo@lfs-inc.com**

1. Carrier will bill Logistics Freight Solutions directly for all services provided unless otherwise agreed to in writing. 2. Freight charges will be submitted to Logistics Freight Solutions with a bill of lading, rate confirmation sheet, and any other supporting documentation, and will be paid within 30 days of receipt of freight bill. 3. Carrier will be responsible for verifying piece count and Cargo space at the time of pick up. Discrepancies will be reported immediately and Carrier shall wait for further instructions before leaving Shipper premises. Notations such as STC (said to contain) and SWP (shrink wrap pallet) will not insulate Carrier from liability in the event of a cargo claim. In the case of Auto Transport, Driver must perform a full inspection of the Vehicle, including Mileage, and set all notations on the BOL. 4. Carrier agrees to provide cargo liability insurance in the amount listed above but not less than a minimum of \$100,000 to compensate the owner of property in the event of loss or damage. Carrier also agrees to provide a current certificate of cargo insurance with Logistics Freight Solutions LLC named as an additional insured. In the event of a cargo claim, Carrier will be liable for any loss, damage, delay, or theft of the cargo pursuant to 49 USC 14706 which may include the full invoice value of the loss. 5. Transportation services requested herein will be provided by the Carrier named above. This shipment may not be tendered to another carrier, brokered out, sub hauled, etc. without written consent by Logistics Freight Solutions LLC. Carrier specifically agrees that all freight tendered to it under this agreement shall be transported on equipment operated only under the authority of the Carrier and shall not in any manner sub contract, broker, or in any other form arrange for the freight to be transported by a third party. 6. Carrier will not solicit freight from any parties to this shipment for a period of twelve (12) months. Carrier acknowledges that this constitutes a No Back Solicitation clause. 7. Carrier consent to pick up shipment acknowledges and constitutes Carriers acceptance of the terms and conditions outlined herein. 8. All cargo claims will be presented to Carrier within nine (9) months of delivery, expected delivery, or loss or damage. Carrier agrees to acknowledge and respond to claims presented in a timely manner in accordance with 49 CFR Part 370. 9. Carrier agrees to deliver freight and adhere to transit times requested herein. In the event of delay, Carrier will notify Logistics Freight Solutions LLC in writing of any anticipated service failures twenty-four (24) hours in advance of the originally expected delivery date. 10. The venue and jurisdiction for any dispute arising from this agreement and/or relationship between Logistics Freight Solutions LLC and Carrier, including but not limited to disputes over individual shipments, shall be brought in the federal or state courts serving Miami-Dade County, Florida.

Printed on Monday August 14 2023

**Accepted:**

*Jim Dujanovic*

**Date:** **08/14/2023**

**Driver:** **YORDANY** **Phone#:** **786 499 5010** **Truck#:** **774**  
**Load #**1779514

**Trailer#:** H03234



Logistics Freight Solutions Inc  
PO BOX 227008  
MIAMI, FL 33222  
Phone: (305) 909-7870  
ops1tl@heyprimo.com

Mailing Address  
Logistics Freight Solutions Inc DBA PRIMO  
PO BOX 227008  
MIAMI, FL 33222  
Phone: (305) 909-7870

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### Dispatch Information

For carrier reference only - not intended for shipper

#### Carrier Information

Name: Royal3 INC  
Phone: (630) 485-7370  
Fax:  
Contact: Peter ext. 106  
Equipment: Dry Van 53'

Motor Carrier#: 944686  
Quote#:  
Load#: 1779514  
Ship Date: 08/14/2023  
Ready: 12:00 PM Close: 05:00 PM  
Delivery Date: 08/16/23 from 08:00 to 17:00

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### LFS Carrier Payment Instructions:

#### 1. Terms

- a. Payment terms are Net 30

#### 2. Required Documents

- a. Invoice (must include load #)
- b. Rate Confirmation as provided by LFS
- c. Bill of Lading / Proof of Delivery (must be signed by driver, shipper, and consignee)

#### 3. Where to Send the Invoice

- a. Please send the required documents to: bills@heyprimo.com
- b. All documents must be attached, do not paste images into the email. This will not be accepted as a valid invoice.

#### 4. Questions About Payment Status

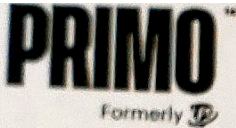
- a. For all payment inquiries please email: payable@heyprimo.com

#### 5. Mailing Address

- a. The mailing address for invoice submissions is below. Email is preferred, if possible. Please note, payment terms do not start until the invoice is received.

Logistic Freight Solutions Inc  
PO BOX 227008  
Miami, FL 33172





Logistics Freight Solutions Inc  
PO BOX 720637  
MIAMI, FL 33172  
Phone: (305) 909-7870  
Fax: (786) 472-4526

BOL# 1779514  
CARRIER: Royal3 INC  
CARRIER PHONE #: (630) 485-7370  
CARRIER QUOTE#:  
DATE: 08/14/23

### CARRIER BILL OF LADING

**PICKUP FROM:**

Amazon - KTX1  
15716 WOLF XING BLDG E  
  
JUSTIN, TX 76247

Phone: (832) 260-5327  
Contact: KELLY LANIERO - Ph.: (832) 260-5327  
Pickup On 08/14/23 between 12:00 and 17:00  
REF.#: ORDAE2308151

**DELIVER TO:**

APEX LOGISTICS  
1301 Devon Ave.  
  
BENSENVILLE, IL 60106

Phone: (847) 786-3850  
Contact: CASSIDY BURNS - Ph.: (847) 786-3850  
Receiving Hours 08:00 to 17:00  
REF.#: ORDAE2308151

**BILL TO THIRD PARTY:**

Logistics Freight Solutions Inc  
PO BOX 720637  
  
MIAMI, FL 33172

Phone: (305) 909-7870  
Contact Ph.: (305) 909-7870

REF.#: ORDAE2308151

**SPECIAL INSTRUCTIONS:**

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APEXKINDLETRANSFERS

**MARKS AND NUMBERS:****DESCRIPTION OF ARTICLES**

QTY	TYPE	STC	HM	SHORT DESCRIPTION	LEN	WID	HGT	STACK	NMFC	CLASS	ACT WT
1	PLT			KINDLES	47	40	42	-		250	150
1	PLT			KINDLES	40	48	50	-		85	700
1	PLT			KINDLES	51	43	33	-		92.5	425
1	PLT			KINDLES	51	42	33	-		85	500
1	PLT			KINDLES	48	40	16	-		250	50
1	PLT			KINDLES	45	40	42	-		100	400
TOTAL:					6				VOLUME:	245.564	2225
					IN			CFT			LB

**FREIGHT CHARGES**

Prepaid ( ) Collect ( ) Third Party (X)

**TOTAL FREIGHT COST:**

NOTE(1) Liability Limitation for loss or damage on this shipment may be applicable. See 49 U.S.C §14706(c)(1)(A) and (B)  
NOTE(2) Commodities requiring special or additional care or attention in handling or stowing must be so marked and packed as to ensure safe transportation with ordinary care. See Sec. 2(e) of NMFC Item 360

**SECTION 7**

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to consignee, without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
Per Logistics Freight Solutions Inc

RECEIVED, subject to the classifications and lawfully field tariffs in effect on the date of issue of this Original Bill of Lading. The property described below, in apparent good good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract, agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern, Western and Illinois Freight Classifications in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.  
THIS CARRIER CONFIRMS THEIR WORKERS COMPENSATION, AUTO LIABILITY AND CARGO COVERAGE IS CURRENT.

(COD) COLLECT ON DELIVERY: \$

COD FEE TO BE PAID BY:

☐ CHECK HERE IF COMPANY CHECK IS ACCEPTABLE

☐ SHIPPER

☐ CONSIGNEE

**SHIPPER CERTIFICATION****CARRIER CERTIFICATION**

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation, according to the applicable regulations of the Department of Transportation

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent document in the vehicle.

PER:

DATE:

PER:

DATE:

AFFIX LABEL HERE

PIECES:

TRAILER:

CARRIER:

**CONSIGNEE CERTIFICATION**

CONSIGNEE:

DATE: 8/14/23

☐ DAMAGED

☐ GOOD CONDITION



Date: 8/14/23

## BILL OF LADING

Page 1

**SHIP FROM**

Name: MRS. CLARK'S FOODS  
Address: 2130 SE HULSIZER DR  
City/State/Zip: ANKENY, IA 50021 USA

SID#: FOB: ☐

Bill of Lading Number: 00700340001334272

(50)

**SHIP TO**

Name: ALLEN DISTRIBUTING  
Address: 1 SOUTH SHEARER DR.  
City/State/Zip: CARLISLE PA 17013 USA  
CID#: FOB: ☒

CARRIER NAME: All Trucks

Trailer number: H03236

Seal number(s): 0020249

SCAC: TRUCK

Pro number:

SEAL #  
0020249

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name:  
Address:  
City/State/Zip:  
Appointment Time 11:30  
Arrival Time 9:04  
Departure Time 9:57  
Steve 8-16-23

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid Collect ☒ 3rd Party☐  
(check box)Master Bill of Lading: with  
underlying Bills of Lading  
attached

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
335932	1140	42180.000	Y	
MCFCO# 253891				
GRAND TOTAL	1140	42180.000		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
19	PLTS	1140	CTNS	43301.000		FOOD STUFFS	73185	60
19		1140		43301.000		GRAND TOTAL		

Received, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of the Bill of Lading.

PROTECT FROM  
HEAT OR FREEZING

NOTE: SHIPPER LOADS FOR DRIVER CONVENIENCE - DRIVER IS RESPONSIBLE FOR LOAD, BLOCKING AND BRACING. THIS SHIPMENT IS NOT A "SL&C" SHIPMENT. DRIVER IS TO INSPECT & COUNT THE LOAD. DRIVER (CARRIER REPRESENTATIVE) ACKNOWLEDGES RECEIPT OF GOODS & QUANTITIES SET FORTH HEREIN IN GOOD CONDITION.

KEEP PRODUCT ABOVE 40° F  
AND BELOW 95° F

The property described above, in apparent good order, except as noted (contents and condition of packages unknown), marked, consigned, and this contract as meaning any person or corporation in possession of the property under the contract, agrees to carry to its usual place of destination. It is mutually agreed, as to each carrier of all or any portion of said property over all or any portion of said route to destination, a performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed.

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

8/14/23

Trailer Loaded:

☒ By Shipper  
☐ By Driver

Freight Counted:

☒ By Shipper  
☒ By Driver/pallets said to contain  
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

X 8/14/23

Property described above is received in good order, except as noted.

267 779 6940