Royal Zinc.

Bill to: PARAMOUNT TRANSPORTATION LOGISTICS SERVICES, LLC 315 NE 14th Street,, Ocala, FL, 34470 Invoice Date: 12/22/2023 Invoice #: 1864324 Terms: NET 30 Due Date: 01/22/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/20/2023		4115 POLYMER PL, FORT WAYNE, IN 46809 - 8720 Rochester Ave, RANCHO CUCAMONGA, CA 91730			
			1	\$6,000.00	\$6,000.00

TOTAL	
\$5,500.00	

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



Paramount Transportation Logistics Services, LLC APPENDIX C SCHEDULED LANE RATE CONFIRMATION

Must reference order #: 1864324



Please return signed rate confirmation to: Name: Eddie Rieck

Name:Eddie RieckFax:937-283-1897Email:eddie.rieck@rlglobal.comPhone:1-800-510-9304Extension:82001091

Carrier: Date:	C	OYAL3INC IICAGO //19/2023 1533	L	60638		Contact: Phone: Fax:	Joey (Cimbaljevic	
	Order: Miles: Temp: BOL:	2173.0 WHS0	89566			Commodity: Weight: Trailer Type: Reference:	44514	ing Material 4.0 LB an (DAT)	
	PU 1	ms Broker info Name: Address:	STONHARD 4115 POLYME FORT WAYNE		46809	Effective D		12/20/2023 0800 12/20/2023 0800 N	
	SO 2	Name: Address:	T. HASEGAWA 8720 Rocheste RANCHO CUC	er Ave	91730	Effective D Driver		12/21/2023 0800 12/22/2023 1500 N	
Payment:			ght Pay (USD) : ier Pay (USD		\$5,500 \$5,500 .				
	-	ibited from use	e as a Bill of La	ding or Proof	of Delivery.	This Rate Confirm		s confidential and for the s ed to any other party.	ole use

Instructions: Initials

Special instructions here



Carrier's Authorized Representative must	sign & fax back	both pages before loading to	Eddie Riec	k a	t 937-283-1897
Signature:			Date:	//	_
Shipments are exclusive use unless ot Please take a picture of the signed BOI		• •	•		
CALIFORNIA SHIPMENTS:					
With your signature you are certifying that your con	npany is "Carb-Co	ompliant" in the state of California. Plea	ase provide the V	IN and tag number	
of your tractor, and if you are utilizing a "Transport	Refrigeration Unit	" (TRU), please provide that unit's VIN	I and tag number	in the provided	
spaces for verification purposes. "Carrier or its age	ent certifies that a	ny TRU equipment furnished will be in	compliance with	the in-use requireme	ents
of California's TRU regulations."					
TRACTOR VIN T	AG #	TRAILER (TRU) VIN		TAG #	
 Your signature constitutes a contractual agreement that this agreement has been approved by a person executing the above agreement. This rate includes all stop-off charges, fuel surchar any other rates, rules, classification, schedule, or ta invoice price of freight tendered to the Carrier for the IN WRITING by an authorized PTLS associate. The driver is responsible for checking and condamaged product immediately. All carrier invoices must be presented for payment Settlement Pay Sheet (when applicable), and a sig For sealed loads, seal numbers and "Seal Intact" Driver must count during loading or get SLC notational count of the coun	n authorized to do arges, loading, un uriff. Carrier shall ansport. All loadi unting the freigh t with original Bill ned copy of this F notation must app ion on Bill of Ladi	o so. If any information is incorrect, ple loading, etc. This rate cannot be chan be liable for full loss resulting from los ng and unloading, detention or other a t at pickup. Driver must report any of Lading signed by shipper, carrier, a Rate Confirmation. bear on Bill of Lading. ing. elivery or payment will be delayed. Cor	ase contact us by ged, modified, or is, damage, injury ccessorial fees m overages, shorta ind consignee as	r email or telephone supplemented by re , or delay. Full loss ust be PRE-APPRC ages, or Proof of Delivery, sig	before ference to is the IVED gned
	Plazea Subm	it Invoices and backup to one o	of the following	N•	
	Email: Fax: Mail:	payables@goptls.com (Pro 937-283-6289 315 NE 14th St Ocala, FL 34470			
By signing this document, the carrier and/or its driv	er(s) ("Carrier" or	"You" or "Your") agree that they may	legally receive SM	IS and/or electronic	messages
("Message(s)") originating from Paramount Transpo	ortation Logistics	Services, L.L.C. ("Paramount") or its c	ontacted entity.		
Responding to or reading any Message while drivin	g a truck or moto	r vehicle can cause serious injury, dea	ath or property da	mage to You or othe	rs.
You agree that You will not read or reply to a mess	age unless Your	vehicle is stationary and parked. Carrie	er and any employ	yee and/or agent of	Carrier assume
all responsibility for abiding by these instructions ar	nd agree that they	will comply with all applicable federal	, state and local la	aws including, but no	ot limited to;
receiving, reading and/or sending Messages, phone	e calls and/or any	other information to or from Paramou	nt. Carrier agrees	to release, indemni	fy, defend
and hold Paramount harmless to the fullest extent	permitted by law f	or any and all claims of any nature aris	sing out of or relat	ting to the Messages	s, the hauling
of this load, any violation of the terms of the broker	carrier agreemer	nt or this rate confirmation. The safe, le	egal and proper o	peration of the Carrie	er supersedes
any request, demand, preference, instruction or infe	ormation provided	by Paramount or its customers with r	espect to any ship	oment. If any employ	/ee of

Paramount or its customer requests, demands, or instructs Carrier to take any action that violates any laws, Carrier shall refuse to transport a load and immediately contact Paramount before taking any further action. Carrier agrees that when it chooses to transport a load it does so on its own volition, exercising its own discretion and decision-making without coercion or undue influence by any individual or entity.



Paramount Transportation Logistics Services, LLC APPENDIX C SCHEDULED LANE RATE CONFIRMATION

Must reference order #: 1864324



Please return signed rate confirmation to: Name: Eddie Rieck

Name:Eddie RieckFax:937-283-1897Email:eddie.rieck@rlglobal.comPhone:1-800-510-9304Extension:82001091

Carrier: Date:	C-	DYAL3INC IICAGO //20/2023 1301	L	60638		Contact: Phone: Fax:	Joey (Cimbaljevic	
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	SO 2	Name: Address:	T. HASEGA 8720 Roche RANCHO C	ester Ave UCAMONGA	91730	Effective D		12/21/2023 0800 12/22/2023 1500 N	
ayment:		Carrier Frei STOP OFF STOP OFF		D) :					
la desuma	nt io probi		rier Pay (U		\$6,000			s confidential and for the so	-lee

of you "The Carrier" and Paramount Transportation Logistics Services, LLC. It is not to be disseminated to any other party.

Instructions: Initials _____ Special instructions here



Carrier's Authorized Representative must	sign & fax back	both pages before loading to	Eddie Riec	k a	t 937-283-1897
Signature:			Date:	//	_
Shipments are exclusive use unless ot Please take a picture of the signed BOI		• •	•		
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of your tractor, and if you are utilizing a "Transport	Refrigeration Unit	" (TRU), please provide that unit's VIN	I and tag number	in the provided	
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of California's TRU regulations."					
TRACTOR VIN T	AG #	TRAILER (TRU) VIN		TAG #	
 Your signature constitutes a contractual agreement that this agreement has been approved by a person executing the above agreement. This rate includes all stop-off charges, fuel surchar any other rates, rules, classification, schedule, or ta invoice price of freight tendered to the Carrier for the IN WRITING by an authorized PTLS associate. The driver is responsible for checking and condamaged product immediately. All carrier invoices must be presented for payment Settlement Pay Sheet (when applicable), and a sig For sealed loads, seal numbers and "Seal Intact" Driver must count during loading or get SLC notational count of the coun	n authorized to do arges, loading, un uriff. Carrier shall ansport. All loadi unting the freigh t with original Bill ned copy of this F notation must app ion on Bill of Ladi	o so. If any information is incorrect, ple loading, etc. This rate cannot be chan be liable for full loss resulting from los ng and unloading, detention or other a t at pickup. Driver must report any of Lading signed by shipper, carrier, a Rate Confirmation. bear on Bill of Lading. ing. elivery or payment will be delayed. Cor	ase contact us by ged, modified, or is, damage, injury ccessorial fees m overages, shorta ind consignee as	r email or telephone supplemented by re , or delay. Full loss ust be PRE-APPRC ages, or Proof of Delivery, sig	before ference to is the IVED gned
	Plazea Subm	it Invoices and backup to one o	of the following	N•	
	Email: Fax: Mail:	payables@goptls.com (Pro 937-283-6289 315 NE 14th St Ocala, FL 34470			
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("Message(s)") originating from Paramount Transpo	ortation Logistics	Services, L.L.C. ("Paramount") or its c	ontacted entity.		
Responding to or reading any Message while drivin	g a truck or moto	r vehicle can cause serious injury, dea	ath or property da	mage to You or othe	rs.
You agree that You will not read or reply to a mess	age unless Your	vehicle is stationary and parked. Carrie	er and any employ	yee and/or agent of	Carrier assume
all responsibility for abiding by these instructions ar	nd agree that they	will comply with all applicable federal	, state and local la	aws including, but no	ot limited to;
receiving, reading and/or sending Messages, phone	e calls and/or any	other information to or from Paramou	nt. Carrier agrees	to release, indemni	fy, defend
and hold Paramount harmless to the fullest extent	permitted by law f	or any and all claims of any nature aris	sing out of or relat	ting to the Messages	s, the hauling
of this load, any violation of the terms of the broker	carrier agreemer	nt or this rate confirmation. The safe, le	egal and proper o	peration of the Carrie	er supersedes
any request, demand, preference, instruction or infe	ormation provided	by Paramount or its customers with r	espect to any ship	oment. If any employ	/ee of

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		outer requin	ments of C	ifications set forth in the box onsolidated Freight Classifica THIS S	HIPPING ORDER	ladin MUS	T BE LEGIBLY FILLED IN	tate Commerce Commission.)	
&L	TL / Expedi	te	RRIER		SHIPPERS NO. 5WS029017	Interior	consignee's no	CARRIER'S NO.	
er to ester	another carrier on the another carrier on the d in all or any said pr and Illinois Freight C hereby certifies that I	Place Fort Way in apparent good ord retract as meaning an re route of said destin operty, that every sen lassifications in effect	yne, IN 46 or, except as y person or c ation. It is m rice to be pe on the date	809 noted (contents and condition o priporation in possession of the utually agreed, as to each carrie formed herounder shall be subj tereof, if this is a rail-water ship	d tariffs in effect on the date of 12-15-2023 Fron f packages unknown), marked, cosign roperty under the contract) agrees to c of all or any of said property over all set to all the terms and conditions of the next, or (2) in the applicable motor ca-	f the issue m Sto and, and de carry to its for any port he Uniform	ed of the Bill of Ladin onhard Log stined as indicated below, usual place of delivery at s on or said route to destina Domestic Straight Bill of Li	jistic Company which said carrier (the word carrier boing aid destination, if on its route, otherwise tice, and as to each party at any time	
	T. Hasega c/o Stonha 8720 Rock Rancho C 91730 And		Mitche	TIME CRITIC	AM PPOINTMENT Itchell 562-261-79 QUIRED			ILL & 1 COPY OF B/L TO: cor Group, INC	
-				MAT	ERIAL INSTRUCT	IONS		Subject to section 7 of conditions of	
+	EXPLINATION OF BUILDING MATER	Contraction of the second s	HM		AD PEWTER/MUSHROOM		4 LB	applicable bill of lading. If this shipm to be delivered to the consignee with	
Ţ	ITEM NO. 34040					recourse on the consignor, the consign shall sign the following statement. This carrier shall not make delivery of			
+	SPECIAL INSTRUCTIONS			60 BAGS 32011 STONFIL OP2 C 1343.82 LB					
+				60 BAGS 32023 STON	FIL OP2 C-1 1129.02 LB			and all other lawful charges.	
+			-	15 BOX 32024 STONF		(Signature of consignor)			
+					OP2 PRIMER LATEX 87 1	918		If charges are to be prepaid write or stamp here. "To be Prepa	
0								write or stamp here. To be method	
1				BAGS 3212C0 ST	ONSET TG5 C 32710.992 L	.В		Prepaid	
3			1	880 BAGS 3218C0 TG	6/URETHANE PRIMER C-1	2784.32	2 LB	Charges advanced \$	
14				120 BOX 3218P0 STO	NSET TG6 ISO/POLYOL 23	307.53 LE	3	SHIPPER'S CERTIFICATIO	
6				LTD QTY pkg Not Regulated for ground transport per US DOT 44 BAGS 53704 TEXTURE 8 - 30 GRIT SILICA 1103.83 LB				This is to certify the above	
17			1			03.63 LE		named materials are properly classified, described, packaged, marked, and labeled and are in	
19			- 1	1 BOX 6554P0 MP7 P	554P0 MP7 PEWTER AB 17.03 LB			proper condition for transport, according to the applicable	
20	Shipment No	WHS089566	1					regulations of the Department of Transportation	
-	Order No.	PRN003981		< 1	±008285			-	
-	BOX	BAGS		Jeal				(M.	
1	148	1924 DRUM	-		# 008285 Luis Dia	22		Ale	
55	GALLON DRUM	0			2000 00020 00			2	
-	IBC	OTHER		Inita	12-2	2-2	3	Jose F. Garcia	
_	0 WEIGHT / LBS	0 TOTAL UNITS	1		LS, NMFC # 34040. CLASS			SIGNATURE	
K	42620.75	32		BUILDING MATERIA		C.O.D.C	harge to be paid by		
C	allect on Delivery	and rer		Color Inc.		Shipper			
5	2 6 4 6	hubers has post	a carrier by	water, the law requires that the	bill of lading shall state whether it is y in writing the agreed or declared va	"camer's or alue of the p	shipper's weight." roperty specifically	to apply prepayment of the charg on the property described hereor	
11 1	the shipment move NOTE - Where the n tated by the shipper	ate is dependention v	alue, shipper		State Section			Agent or Cashier	
9		1 man	,	** EMERGENCY OUTSIDE U.S (703)-52 specific health and safety	Agent CONTACT 1-800-424-9300 27-3887 CHEMTREC Regist Information. To request an SDS	Per) (CHEM stration 5, please c	TREC) (The signa CCN233599 all 1-800-257-7953 or	Per ture here acknowledges only the amoun go to our website, www.stonhard.	
	Please refer to	010 01010							