

☒ USDOT Number
 ☐ MC/MX Number
 ☐ Name

Enter Value:

Company Snapshot

MG EXPRESS LLC
USDOT Number: 2506309

ID/Operations | [Inspections/Crashes In US](#) | [Inspections/Crashes In Canada](#) | [Safety Rating](#)

Carriers: If you would like to update the following ID/Operations information, please complete and submit form [MCS-150](#) which can be obtained [online](#) or from your State FMCSA office. If you would like to challenge the accuracy of your company's safety data, you can do so using FMCSA's [DataQs](#) system.

Other Information for this Carrier

- [SMS Results](#)
- [Licensing & Insurance](#)

Carrier and other users: FMCSA provides the Company Safety Profile (CSP) to motor carriers and the general public interested in obtaining greater detail on a particular motor carrier's safety performance than what is captured in the Company Snapshot. To obtain a CSP please visit the [CSP order page](#) or call (800)832-5660 or (703)280-4001 (Fee Required).

For help on the explanation of individual data fields, click on any field name or for help of a general nature go to [SAFER General Help](#).

The information below reflects the content of the FMCSA management information systems as of 02/07/2024.

To find out if this entity has a pending insurance cancellation, please [click here](#).

For more information about the Out of Service status of this company, click on [OOS Details](#).

Entity Type:	CARRIER		
Operating Status:	<div>OUT-OF-SERVICE</div>		
	Out of Service Date:	01/16/2024	
Legal Name:	MG EXPRESS LLC		
DBA Name:			
Physical Address:	111 FIRST ST ORLANDO, FL 32824		
Phone:	(786) 253-9545		
Mailing Address:	111 FIRST ST ORLANDO, FL 32824		
USDOT Number:	2506309	State Carrier ID Number:	
MC/MX/FF Number(s):	MC-868934	DUNS Number:	--
Power Units:	1	Drivers:	1
MCS-150 Form Date:	12/28/2023	MCS-150 Mileage (Year):	2,053,300 (2022)
Operation Classification:			
<div> <div> <div>x Auth. For Hire</div> <div>Exempt For Hire</div> <div>Private(Property)</div> <div>Priv. Pass. (Business)</div> </div> <div> <div>Priv. Pass.(Non-business)</div> <div>Migrant</div> <div>U.S. Mail</div> <div>Fed. Gov't</div> </div> <div> <div>State Gov't</div> <div>Local Gov't</div> <div>Indian Nation</div> </div> </div>			
Carrier Operation:			
<div> <div>x Interstate</div> <div>Intrastate Only (HM)</div> <div>Intrastate Only (Non-HM)</div> </div>			
Cargo Carried:			
<div> <div> <div>x General Freight</div> <div>Household Goods</div> <div>Metal: sheets, coils, rolls</div> <div>Motor Vehicles</div> <div>Drive/Tow away</div> <div>Logs, Poles, Beams, Lumber</div> <div>Building Materials</div> <div>Mobile Homes</div> <div>Machinery, Large Objects</div> <div>Fresh Produce</div> </div> <div> <div>Liquids/Gases</div> <div>Intermodal Cont.</div> <div>Passengers</div> <div>Oilfield Equipment</div> <div>Livestock</div> <div>Grain, Feed, Hay</div> <div>Coal/Coke</div> <div>Meat</div> <div>Garbage/Refuse</div> <div>US Mail</div> </div> <div> <div>Chemicals</div> <div>Commodities Dry Bulk</div> <div>x Refrigerated Food</div> <div>Beverages</div> <div>Paper Products</div> <div>Utilities</div> <div>Agricultural/Farm Supplies</div> <div>Construction</div> <div>Water Well</div> </div> </div>			



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**SAFETY PERFORMANCE HISTORY
RECORDS REQUEST****- CONFIDENTIAL -****Company:** MG EXPRESS LLC (DOT2506309)**Phone:** (786) 253-9545**Date:** 11/27/23**Address:** 111 FIRST ST ORLANDO, FL 32824**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Juan Francisco Hernández Ofaril (Nov 27, 2023 16:36 EST)

Safety Department (Nov 29, 2023 14:51 EST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Juan Francisco Hernandez Ofaril **SSN:** 395757005**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____

**Zigi Freight Inc. dba Royal 3, Inc.
6850 W. 63rd St.
Chicago, IL 60638**

December 27, 2023

RE: Employee Verification Requests for Juan Francisco Hernandez Ofarril from SANZO EXPRESS LLC.

To whom it may concern:

As of November 27, 2023 I have made the following attempts to contact SANZO EXPRESS LLC in order to verify Juan Francisco Hernandez Ofarril's employment there.

The first attempt was made on December 11, 2023 when I sent a request at SANZOEXPRESS@GMAIL.COM which was recommended by safety person when I reached out through phone to their office.

On December 18, 2023 I re-sent request completing the second attempt and on December 25, 2023 I have made a third and final attempt. A formal response from SANZO EXPRESS LLC was never received.

Sincerely,

Kristina Milacic

A handwritten signature in blue ink, appearing to read 'Kristina', is positioned above a solid blue horizontal line.



Employment Verifications <ev@royal3inc.com>

Employment Verification for Juan Francisco Hernandez Ofarri

1 message

Employment Verifications <ev@royal3inc.com>
To: SANZOEXPRESS@GMAIL.COM

Mon, Dec 25, 2023 at 2:54 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Juan Francisco Hernandez Ofarri's employment with your company.

Please find the attached form, and send it back to me at your earliest convenience.

Thank you!

Kind regards,

Sofia

HR Department

Zigi Freight dba Royal 3 Inc.

6850 W. 63rd St.

Chicago, IL 60638

p. 630-566-2119

f. 630-485-6980

e. ev@royal3inc.com



03DQ Royal 3 Inc - Juan Francisco Hernandez Ofarri (2)-4.pdf

899K



Employment Verifications <ev@royal3inc.com>

Employment Verification for Juan Francisco Hernandez Ofarri

1 message

Employment Verifications <ev@royal3inc.com>
To: SANZOEXPRESS@GMAIL.COM

Mon, Dec 18, 2023 at 3:47 PM

Hello,

I am a safety officer from Royal3 INC company.
I am sending you this email to confirm Juan Francisco Hernandez Ofarri's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind regards,
Sofia

HR Department
Zigi Freight dba Royal 3 Inc.
6850 W. 63rd St.
Chicago, IL 60638
p. 630-566-2119
f. 630-485-6980
e. ev@royal3inc.com



03DQ Royal 3 Inc - Juan Francisco Hernandez Ofarri (2)-4.pdf
899K



Employment Verifications <ev@royal3inc.com>

Employment Verification for Juan Francisco Hernandez Ofarri

1 message

Employment Verifications <ev@royal3inc.com>
To: SANZOEXPRESS@GMAIL.COM

Mon, Dec 11, 2023 at 1:22 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Juan Francisco Hernandez Ofarri's employment with your company.

Please find the attached form, and send it back to me at your earliest convenience.

Thank you!

Kind regards,

Sofia

HR Department

Zigi Freight dba Royal 3 Inc.

6850 W. 63rd St.

Chicago, IL 60638

p. 630-566-2119

f. 630-485-6980

e. ev@royal3inc.com



03DQ Royal 3 Inc - Juan Francisco Hernandez Ofarri (2)-4.pdf

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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: SANZO EXPRESS LLC (DOT3017107) **Phone:** (786) 792-1880
Address: 4996 NW 57TH CT JENNINGS, FL 32053-3164 **Fax:**

Date: 11/27/23

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Juan Francisco Hernández Ofarril (Nov 27, 2023 16:36 EST)

Safety Department (Nov 29, 2023 14:51 EST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Juan Francisco Hernandez Ofarril **SSN:** 395757005**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____

☒ USDOT Number
 ☐ MC/MX Number
 ☐ Name

Enter Value:

Company Snapshot

ORTEGA PRODUCE LLC
 USDOT Number: 3315411

ID/Operations | [Inspections/Crashes In US](#) | [Inspections/Crashes In Canada](#) | [Safety Rating](#)

Carriers: If you would like to update the following ID/Operations information, please complete and submit form [MCS-150](#) which can be obtained [online](#) or from your State FMCSA office. If you would like to challenge the accuracy of your company's safety data, you can do so using FMCSA's [DataQs](#) system.

Carrier and other users: FMCSA provides the Company Safety Profile (CSP) to motor carriers and the general public interested in obtaining greater detail on a particular motor carrier's safety performance then what is captured in the Company Snapshot. To obtain a CSP please visit the [CSP order page](#) or call (800)832-5660 or (703)280-4001 (Fee Required).

For help on the explanation of individual data fields, click on any field name or for help of a general nature go to [SAFER General Help](#).

The information below reflects the content of the FMCSA management information systems as of **02/07/2024**. **Carrier VMT Outdated.**

Entity Type:	CARRIER/SHIPPER		
Operating Status:	NOT AUTHORIZED	Out of Service Date:	None
Legal Name:	ORTEGA PRODUCE LLC		
DBA Name:			
Physical Address:	2177 NW 8TH AVE MIAMI, FL 33127		
Phone:	(561) 692-5880		
Mailing Address:	9165 SE 66TH DR OKEECHOBEE, FL 33476-1532		
USDOT Number:	3315411	State Carrier ID Number:	
MC/MX/FF Number(s):		DUNS Number:	--
Power Units:	3	Drivers:	2
MCS-150 Form Date:	09/19/2022	MCS-150 Mileage (Year):	100,000 (2021)
Operation Classification:			
<input checked="" type="checkbox"/> Auth. For Hire <input type="checkbox"/> Exempt For Hire <input checked="" type="checkbox"/> Private(Property) Priv. Pass. (Business)		Priv. Pass.(Non-business) Migrant U.S. Mail Fed. Gov't	
		State Gov't Local Gov't Indian Nation	
Carrier Operation:			
Interstate		Intrastate Only (HM)	<input checked="" type="checkbox"/> Intrastate Only (Non-HM)
HM Shipper Operation:			
		Interstate	<input checked="" type="checkbox"/> Intrastate
Cargo Carried:			
<input checked="" type="checkbox"/> General Freight Household Goods Metal: sheets, coils, rolls Motor Vehicles Drive/Tow away Logs, Poles, Beams, Lumber Building Materials Mobile Homes Machinery, Large Objects <input checked="" type="checkbox"/> Fresh Produce		Liquids/Gases Intermodal Cont. Passengers Oilfield Equipment Livestock Grain, Feed, Hay Coal/Coke Meat Garbage/Refuse US Mail	
		Chemicals Commodities Dry Bulk Refrigerated Food Beverages Paper Products Utilities Agricultural/Farm Supplies Construction Water Well	



3

SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: ORTEGA PRODUCE LLC (DOT3315411)**Phone:** (561) 692-5880**Date:** 11/27/23**Address:** 2177 NW 8TH AVE MIAMI, FL 33127**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Juan Francisco Hernández Ofarril (Nov 27, 2023 16:36 EST)

Safety Department (Nov 29, 2023 14:51 EST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Juan Francisco Hernandez Ofarril **SSN:** 395757005**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____