

# Florida

CDL

USA


4d DLN **W420-172-71-426-0** 9 CLASS A

1 WALLS  
2 DARRIN LAVERN  
8 4531 SW 32ND AVE APT 10  
FORT LAUDERDALE, FL 33312-6932

3 DOB 11/26/1971 15 SEX M  
4b EXP 11/26/2030 16 HGT 5'-07"  
12 REST NONE 9a END N

4a ISS 10/12/2022  
5DD X652210124330

Operation of a motor vehicle constitutes  
consent to any sobriety test required by law.





**Request for Taxpayer  
Identification Number and Certification**

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

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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

2 Business name/disregarded entity name, if different from above  
Cargo SWIFT SHIPPING L.L.C.

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) ► \_\_\_\_\_

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.  
4531 S.W. 32nd AVE

6 City, state, and ZIP code  
Fort Lauderdale Fla. 33312

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


or

Employer identification number

9	3	-	1	3	7	5	3	2	4
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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 ►

D. Walls

Date ►

8-1-24

**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](http://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.

## DIRECT DEPOSIT REQUEST FORM

Please Complete this form clearly, print and sign.

Driver's Name

Cargo Swift Shipping

Routing Number

063107513

Account Number

1928439569

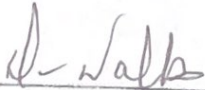
Please circle one

CHECKING

SAVING

I Authorize Royal and BRZ to automatically deposit my paycheck into account listed above.

Driver Signature



Date

8-1-24



ENERGY, DO NOT REMOVE THIS CO

# WELLS FARGO BANK

931 W STATE ROAD 84 FORT LAUDERDALE, FL 33315

1003

DATE

63-751/631

PAY TO THE ORDER OF

\$

DOLLARS

**DARRIN L WALLS**

4531 SW 32ND AVE APT 10  
FORT LAUDERDALE FL 33312-6932

⑆063107513⑆6213789412⑆1003



**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L23000205928  
FILED 8:00 AM  
April 26, 2023  
Sec. Of State  
dsultana**

**Article I**

The name of the Limited Liability Company is:  
CARGO SWIFT SHIPPING LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
4531 SW 32ND AVE APT 10  
FORT LAUDERDALE, FL. US 33312

The mailing address of the Limited Liability Company is:  
4531 SW 32ND AVE APT 10  
FORT LAUDERDALE, FL. US 33312

**Article III**

The name and Florida street address of the registered agent is:  
DARRIN WALLS  
4531 SW 32ND AVE APT 10  
DAVIE, FL. 33312

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DARRIN WALLS

## **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AMBR  
DARRIN WALLS  
4531 SW 32ND AVE APT 10  
FORT LAUDERDALE, FL. 33312 US

**L23000205928**  
**FILED 8:00 AM**  
**April 26, 2023**  
**Sec. Of State**  
dsultana

Signature of member or an authorized representative

Electronic Signature: CHEYENNE MOSELEY, LEGALZOOM.COM, INC.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.