



Control Number: 49779



Item Number: 1050

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ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:

This is a new broker registration

This supplies information for a pending broker registration

This amends an existing, completed broker registration

Provide an explanation of the amendment:

2. Authorized Representative or Attorney to contact about this application:

Name MICHAEL BURNETT		Title PARTNER
Business Address 211054 CTY ROAD Y		
City HATLEY	State WI	Zip 544440
Telephone Number 715-252-5221		
Email Address Michael@vieenergie.com		

3. Registering Entity: List the registering entity's legal name, business address, and telephone number.

Name VIEENERGIE LLC		
Business address 242 MICHELANGELO PLACE		
City ST. AUGUSTINE	State FLORIDA	Zip 32084
Telephone Number 609-923-9879		

4. Type of organization of registering entity:

Sole proprietor Other

Corporation

Limited Liability Company, L.L.C

Limited Partnership

1050

5. Description of the brokerage services provided by the registering entity and type of customers served.

Description of Services:
selling natural gas and electricity

Types of Customers: *Check all that apply*

- Residential Industrial Other
 Commercial Municipalities

6. **Other Names.** List any trade, commercial, and doing-business-as (d b a) names, other than the legal name listed in #3 above, under which the registering entity intends to operate. Any name in which a corporation intends to operate must be registered with the Secretary of State.

1 st	2 nd
3 rd	4 th
5 th	

7. **Officers.** Provide, as **Attachment A**, the names, business addresses, email addresses, and phone numbers of the registering entity's officers, directors, and partners, as applicable.

Attachment A

8. **Customer Service Contact.** List the telephone number and email address of the customer service department. If the registering entity does not have a dedicated customer service department, then provide the name, title, address, email address, and telephone number of the customer service contact person.

Customer Service Department	Telephone Number	Email Address
Name JON KING	Title PARTNER	
Business address 130 S. STEVENS STREET		
City RHINELANDER	State WI	Zip 54501
Telephone Number 715-771-9075		
Email Address Jon@digitalmarketingspecialists.com		

9. **Regulatory contact person.** List the name, physical business address, telephone number, and email address for a regulatory contact person.

Name RODGER HILL	Title PARTNER	
Business address 3421 24TH STREET		
City TEMPLE HILLS	State MARYLAND	Zip 20748
Telephone Number 301-526-0600		
Email Address rodger.hill@yahoo.com		

10. Secretary of State Record. Entities who must register with the Secretary of State must provide a copy of the certificate of status issued by the Texas Secretary of State certifying that the registering entity is authorized to transact business in Texas.

Copy of Secretary of State certificate of status is attached.



State of Wisconsin
Department of Financial Institutions

ARTICLES OF ORGANIZATION - LIMITED LIABILITY COMPANY

Executed by the undersigned for the purpose of forming a Wisconsin Limited Liability Company under Chapter 183 of the Wisconsin Statutes:

Article 1. **Name of the limited liability company:**

Vie Energy, LLC

Article 2. **The limited liability company is organized under Ch. 183 of the Wisconsin Statutes.**

Article 3. **Name of the initial registered agent:**

Derrick Bushman

Article 4. **Street address of the initial registered office:**

621 East Grand Avenue
Rosholt, WI 54473
United States of America

Article 5. **Management of the limited liability company shall be vested in:**

A manager or managers

Article 6. **Name and complete address of each organizer:**

Derrick Bushman
621 East Grand Avenue
Rosholt, WI 54473
United States of America

Other Information. **This document was drafted by:**

Daniel D. Daubert, ESQ

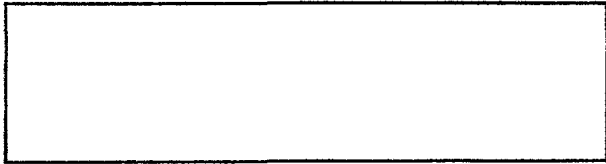
Organizer Signature:

Derrick Bushman

Date & Time of Receipt:

8/24/2017 10:27:41 AM

ARTICLES OF ORGANIZATION - Limited Liability Company(Ch. 183)



Filing Fee: \$130.00
Total Fee: \$130.00

ENDORSEMENT

**State of Wisconsin
Department of Financial Institutions**

EFFECTIVE DATE	
8/24/2017	

FILED 8/24/2017	Entity ID Number V027833
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Attachment A

Derrick Bushman	Partner	419 Country Road Y Hatley, WI 54440	715-252-5221
Rodger Hill	Partner	3421 24th St. Temple Hills, MD 20748	301-526-0600
Michael Burnett	Partner	242 Michelangelo Place St. Augustine, FL 32084	609-923-9879

AFFIDAVIT

My name is Michael Burnett. I am the Member of the Registering Entity.

I swear or affirm that I have personal knowledge of the facts stated in the attached registration, that I am competent to testify to them, and that I have the authority to submit this application form on behalf of the registering entity. I further swear or affirm that all statements made in the Registration Form are true, correct and complete and that any substantial changes in such information will be provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the registering entity understands and will comply with all requirements of the applicable law and rules, including customer protection provisions, disclosure requirements, and marketing guidelines for retail electric service.

Michael Burnett
Signature of Registering Entity's Owner, Partner, or Officer

Michael Burnett
Printed Name

Vieenergie LLC
Name of Registering Entity

Sworn and subscribed before me this 4 day of September, 2019
Month Year

Patricia A. Kelley
Notary Public in and For the State of New Jersey
My commission expires on March 19, 2024

