

Control Number: 49779



Item Number: 1244

Addendum StartPage: 0



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 T. Mishkin				Title Managing Director		
Business Address 11472 Paradise Cove Lane						
City Wellington	State _{FL}		Zip ₃₃	449		
Telephone Number (972) 499-4519						
Email Address Michael. Mishkin@iqom.net						
3 Registering Entity. I ist the registering entity's legal name, business address, and telephone number.						
NameiQom Energy Management, LLC						
Business address 11472 Paradise Cove Lane						
CityWellington	State _{FL}		Zip ₃₃	449		
Telephone Number (972) 499-4519						
4. Type of organizatio	n of registering ent	tity				
 □ Sole proprietor □ Corporation ☑ Limited Liability Co □ Limited Partnership 		Other				
Limited Familieship						

Broker Registration Form Last Updated August 8, 2019

5. Description of the br	okerage services provided by th	e registering entity and type of customers served.				
Description of Services	S:					
Types of Customers: C	Check all that apply					
□ Residential ☑ Commercial	✓ Industrial □ Municipalities	□ Other				
listed in #3 above, unde	any trade, commercial, and doir er which the registering entity in be registered with the Secretary	g-business-as (d b a) names, other than the legal name itends to operate. Any name in which a corporation of State.				
1 st		2 nd				
3 rd	4 th	5 th				
7. Officers Provide, as Attachment Λ , 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 (972) 499-4519	Email Address Michael.Mishkin@iqom.net				
Name Michael T. Mishl	kin	Title _{Managing} Director				
Business address 11472 Paradise Cove Lane						
City Wellington	State _{FL}	Zip ₃₃₄₄₉				
Telephone Number 9724994519						
Email Address Michae	el T. Mishkin					
9. Regulatory contact for a regulatory contact		al business address, telephone number, and email address				
Name Michael T. Mishl	kin	TitleManaging Director				
Business address 1147	'2 Paradise Coave Lane					
City Wellington	State _{FL}	Zip ₃₃₄₄₉				
Telephone Number (9	72) 499-4519					
Email Address Michae	el.Mishkin@iqom.net					

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.

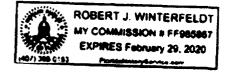
Copy of Secretary of State certificate of status is attached.

AFFIDAVIT

My name is MICHAELT. MISTICH am the MAUAGING DEECTOR 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.

Michal T. Mishmi	
Signature of Registering Entity's Owner, Partner, or Office MICHAELT MISHKIN Printed Name	er
Name of Registering Entity	LIC
Sworn and subscribed before me this 7 day of Nov	. 2019
Ad Worth	Yea
Notary Public of and For the State of Florida My commission expires of Feb 29 2020	



Attachment A to PUCT Application for Registration under PURA Section 39.3555 iQom Energy Management, LLC

Question 7: Officers.

Michael T. Mishkin, Managing Director, Sole LLC Member, contact info as provided herein four times.

There are no other officers, directors or partners.



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Application for Registration for iQom Energy Management, LLC (file number 800671734), a FLORIDA, USA, Foreign Limited Liability Company (LLC), was filed in this office on June 19, 2006.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 07, 2019.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State