

Control Number: 49779



Item Number: 1263

Addendum StartPage: 0



RECEIVED 2019 NOV 21 PM 3: 09 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 War | ner | Title Principal | |
|------------------|-----------------------|-----------------|--|
| Business Address | P.O. Box 1644 | | |
| City Austin | State Texas | Zip 78767 | |
| Telephone Numb | er 512-680-3407 | | |
| Email Address m | nike@warnerseale.coom | | |

Zip 78767

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

Name Warner Seale Public Affairs

Business address P.O. Box 1644

City Austin

Telephone Number 512-680-3407

4. Type of organization of registering entity:

State Texas

□ Sole proprietor

□ Other

Corporation

□ Limited Liability Company, L.L.C

□ Limited Partnership

Broker Registration Form Last Updated August 8, 2019

1263 1263

| 5 Description of the b | rokerage services provided by th | ne registering entity and type of customers served |
|---|---|--|
| Description of Service Brokering electric | | |
| Types of Customers: | Check all that apply | |
| ☑ Residential ☑ Commercial | IndustrialMunicipalities | Ø Other |
| listed in 43 above, und intends to operate mus | | |
| 1 st | | 2 nd |
| 3 rd | 4 th | 5 th |
| | is Attachment A. the names, bu officers, directors, and partners. | isiness addresses, email addresses, and phone numbers of as applicable |
| department. If the reg | istering entity does not have a de | iber and email address of the customer service idicated customer service department, then provide the ber of the customer service contact person |
| Customer Service Department | Telephone Number | Email Address |
| Name Michael War | ner | Title |
| Business address P.C |). Box 1644 | |
| City Austin | State Texas | Zip 78767 |
| Telephone Number 5 | 5126803407 | k |
| Email Address mike | @warnerseale.com | |
| 9. Regulatory contact for a regulatory contact | | al business address, telephone number, and email address |
| Name Michael War | ner | Title Principal |
| Business address P.C |). Box 1644 | L, , ,,,,,, _ |
| City Austin | State Texas | Zip 78767 |
| Telephone Number 5 | 5126803407 | <u> </u> |
| Email Address mike | @warnerseale.com | |

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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 Michael Waln I am the Principal ____ 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.

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

Michael Warnor

Warner Seale Wublic Affairs

Name of Registering Entity

Sworn and subscribed before me this $\frac{21}{21}$ day of <u>Novembr</u> ,2019. Year

State of Texas

| 3.0 | THERESA ANN ALBA NOTARY PUBLIC ID# 3241129 State of Texas Comm. Exp. 09-05-2023 |
|--------------|---|
| 3 - Sar + - | ID# 3241120 |
| 9 1 9 | State of Texas |
| S COF KE | Comm Evo 09.05-2022 |

Notary Public in and For the State of TEXAS My commission expires on 9 - 5 - 20 2 =

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Ruth R. Hughs Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Warner Seale Public Affairs, Inc. (file number 802563779), a Domestic For-Profit Corporation, was filed in this office on October 17, 2016.

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 20, 2019.

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Ruth R. Hughs Secretary of State