

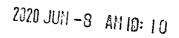
Control Number: 49779



Item Number: 1479

Addendum StartPage: 0





## ELECTRICITY BROKER REGISTRATION FORM STORY TO A

PROJECT NO. 49779

| 1. Check the most app                 | ropriate box to describe this sub      | mission:                                             |
|---------------------------------------|----------------------------------------|------------------------------------------------------|
| ☑This is a new broke                  | er registration                        |                                                      |
| ☐This supplies infor                  | mation for a pending broker registr    | ration                                               |
| ☐This amends an ex                    | cisting, completed broker registration | on                                                   |
| Provide an explanat                   | ion of the amendment:                  |                                                      |
|                                       |                                        |                                                      |
|                                       | ntative or Attorney to contact at      |                                                      |
| Name UMESH SHRESTHA                   |                                        | Title MANAGER                                        |
| <b>Business Mailing Add</b>           | ress 8505 REVENUE WAY                  |                                                      |
| City NORTH RICHL                      | State TEXAS                            | <b>Z</b> ip 76182                                    |
| Telephone Number 46                   | 69-777-0007                            |                                                      |
| Email Address umesh                   | 7@gmail.com                            |                                                      |
| 3. Registering Entity: email address. | List the registering entity's legal by | usiness name, mailing address, telephone number, and |
| Business Name UMES                    | H SHRESTHA                             |                                                      |
| Mailing address 8505                  | REVENUE WAY                            |                                                      |
| City NORTH RICHL                      | State TEXAS                            | Zip 76182                                            |
| Telephone Number 46                   | 9-777-0007                             |                                                      |
| Email Address UMES                    | H7@GMAIL.COM                           |                                                      |

Broker Registration Form Last Updated May 14, 2020 Page 2 of 4

| 4. Business structure. Select the form of business being registered.                                                                                                                                                                                                                                                                                                 |               |                 |                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------|------------------|--|
| ☑ Sole proprietor                                                                                                                                                                                                                                                                                                                                                    | ☐ Corporation | □ Partnersh     | nip              |  |
| ☐ Limited Liability C                                                                                                                                                                                                                                                                                                                                                | ompany (LLC)  | ☐ Limited l     | Partnership      |  |
| <b>5. Other Names</b> . 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 Texas Secretary of State.                                                               |               |                 |                  |  |
| 1 <sup>st</sup>                                                                                                                                                                                                                                                                                                                                                      |               | 2 <sup>nd</sup> |                  |  |
| 3 <sup>rd</sup>                                                                                                                                                                                                                                                                                                                                                      |               | 4 <sup>th</sup> |                  |  |
| <b>6. Customer Service Contact</b> . List the telephone number, business mailing address, 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, business mailing address, email address, and telephone number of the customer service contact person. |               |                 |                  |  |
| Name UMESH SHRESTHA                                                                                                                                                                                                                                                                                                                                                  |               | Title MANAGER   |                  |  |
| Business mailing address 8505 REVENUE WAY                                                                                                                                                                                                                                                                                                                            |               |                 |                  |  |
| City NORTH RICHLAND HILLS                                                                                                                                                                                                                                                                                                                                            |               | State<br>TEXAS  | Zip <u>76182</u> |  |
| Telephone Number                                                                                                                                                                                                                                                                                                                                                     |               |                 |                  |  |
| Email Address UMESH7@GMAIL.COM                                                                                                                                                                                                                                                                                                                                       |               |                 |                  |  |
| <b>7. Commission contact person</b> . List the name, business mailing address, telephone number, and email address for a person who Commission Staff may contact.                                                                                                                                                                                                    |               |                 |                  |  |
| Name UMESH SHRESTHA                                                                                                                                                                                                                                                                                                                                                  |               | Title MANAGER   |                  |  |
| Business mailing address 8505 REVENUE WAY                                                                                                                                                                                                                                                                                                                            |               |                 |                  |  |
| City NORTH RICHLAND HILLS                                                                                                                                                                                                                                                                                                                                            |               | State<br>TX     | Zip 76182        |  |
| Telephone Number 469-777-0007                                                                                                                                                                                                                                                                                                                                        |               |                 |                  |  |
| Email Address UMESH7@GMAIL.COM                                                                                                                                                                                                                                                                                                                                       |               |                 |                  |  |
|                                                                                                                                                                                                                                                                                                                                                                      |               | <del></del>     |                  |  |

Broker Registration Form Last Updated May 14, 2020

## **AFFIDAVIT**

| My name is <u>UMESH SHRESTHA</u> . I                                                                                                                                                                                                                              | am the owner, partner, or an officer (Circle One) of the Applicant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| competent to testify to them, and that I registering entity. I further swear or affi all applicable laws and is in good stand the application are true, correct and corprovided to the Public Utility Commissi understands and will comply with all respectively. | nowledge of the facts stated in the attached registration, that I am have the authority to submit this application form on behalf of the firm that the applicant is authorized to do business in Texas under ling with the Texas Secretary of State; that all statements made in mplete; and that any material changes in such information will be on of Texas in a timely manner. I swear or affirm that the applicant requirements of the applicable law and rules, including custome ements, and marketing guidelines for retail electric service.  Signature of Registering Entity's Owner, Partner, or Officer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                   | LIME OF THE STATE |
|                                                                                                                                                                                                                                                                   | UMESH SHRESTHA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                   | Printed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                   | Name of Registering Entity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Sworn and s                                                                                                                                                                                                                                                       | ubscribed before me this day of,,,,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                   | 1000 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                   | Notary Public in and For the State of Yexas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                   | My commission expires on 9/16/2022.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Broker Registration Form<br>Last Updated May 14, 2020                                                                                                                                                                                                             | Vega Yika So  My Commission Expires 09/16/2022 ID No. 129958615                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |