

Control Number: 49779



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## ELECTRICITY BROKER REGISTRATION FORM

## PROJECT NO. 49779

1. Check the most app	propriate box to describe this sub	nission			
☐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:					
add two DBA's Zingo Energy Consulting and Zingo Utility Solutions					
2. Authorized Repres	entative or Attorney to contact ab	out thi	application:		
Name Travis Monty Eg	gett		Title Founder		
Business Mailing Address 1310 Rayford Park RD #216					
City Spring	State Texas	Zip <u>7</u>	7386		
Telephone Number 281-214-7000					
Email Address Travis@ZingoSolutions.Com					
3: Registering Entity: email address.	List the registering entity's legal bu	siness r	name; mailing; address, telephone number, and		
Business Name Z Champion & Associations LLC					
Mailing address 1310 Rayford Park Rd #216					
City Spring	State Texas	<b>Zip</b> <u>7</u>	7386		
Telephone Number 281-217-7000					
Email Address Travis	@ZingoSolutions.Com				

4. Business structure. Select the form of busin	ess being regi	stered.			
☐ Sole proprietor ☐ Corporation	☐ Partners	hip			
☑ Limited Liability Company (LLC)	□ Limited	Partnership			
5. 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 Texas Secretary of State.  1st Zingo Energy Consulting  2nd Zingo Utility Solutions  3rd  4th					
<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	Title				
Business mailing address					
City	State	Zip			
Telephone Number					
Email Address					
7. Commission contact person. List the name, business mailing address, telephone number, and email address for a person who Commission Staff may contact.					
Name	Title				
Business mailing address					
City	State	Zip			
Telephone Number					
Email Address					

## **AFFIDAVIT**

My name is ITavis Monty Eggett. I am the owner, partner, or an officer (Circle One) of the Applicant
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 the applicant is authorized to do business in Texas under all applicable laws and is in good standing with the Texas Secretary of State; that all statements made in the application are true, correct and complete; and that any material changes in such information will be provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the applicant 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
Travis Monty Eggett Printed Name
Z Champion & Associates LLC  Name of Registering Entity
Sworn and subscribed before me this $\frac{28}{200}$ day of $\frac{\text{August}}{\text{Month}}$ , $\frac{7010}{\text{Year}}$
Chalite
Notary Public in and For the State of TELAS  My commission expires on 8/31/2023
CINDY MELISSA CALIXTO  Notary Public, State of Texas  Comm. Expires 08-21-2023  Notary ID 13214455-2