

Control Number: 49779



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2020 SEP - 1 MM S: 32 ELECTRICITY BROKER REGISTRATION FORM

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PROJECT NO. 49779

1. Check the most app	propriate box to describe this subm	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:						
2. Authorized Representative or Attorney to contact about this application:						
Name			Title			
Business Mailing Address						
City	State					
Telephone Number						
Email Address						
3. Registering Entity : List the registering entity's legal business name, mailing address, telephone number, and email address.						
Business Name FuseOn Connections, Inc.						
Mailing address 5308 W Plano Pkwy, Ste 100						
City Plano	State TX	Zip <u>7</u>	5093			
Telephone Number 469-835-8890						
Email Address Iquinata@fuseon.com						



4. Business structure. Select the form of business being registered.					
□ Sole proprietor	□ 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.					
1 st FuseOn	2 nd FuseOn Connections				
3 rd Resident Connection Services	4 th				
6. Customer Service Contact . 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 Leilani Quinata	Title <u>COO</u>	Title <u>COO</u>			
Business mailing address 5308 W Plano Pkwy	/, Ste 100				
City Plano	State TX	Zip <u>75093</u>			
Telephone Number					
Email Address rcs@fuseon.com					
7. Commission contact person. List the name, business mailing address, telephone number, and email address for a person who Commission Staff may contact.					
Name Leilani Quinata	Title COO				
Business mailing address 5308 W Plano Pkwy, Ste 100					
City Plano	State TX	Zip <u>75093</u>			
Telephone Number <u>469-835-8890</u>					
Email Address rcs@fuseon.com					

AFFIDAVIT

My name is David Kadleck . 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

David Kadleck Printed Name

FuseOn Connections, Inc. Name of Registering Entity

Sworn and subscribed before me this <u>21</u> day of	r <u>August</u>	,2020.
Nann	Month	Year
Notary Public in and For the State of My commission expires on 70,	EXAS 2023	·