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ELECTRICITY BROKER REGISTRATION FORM

2021 JUN 21 AM 9:05

PUBLIC UTILITY COMMISSION
FILING CLERK

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 Philip Brown Title Mr.

Business Mailing Address 1415 Winnie St.

City Galveston State Texas Zip 77550

Telephone Number (409) 599 3579

Email Address timbaventures@gmail.com

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

Business Name Timba Ventures, LLC

Mailing address P.O. Box 1251

City Galveston State Texas Zip 77553

Telephone Number (409) 599-3579

Email Address timbaventures@gmail.com

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4. Business structure. Select the form of business being registered.

- ☐ Sole proprietor ☐ Corporation ☐ Partnership
☒ 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 _____	2 nd _____
3 rd _____	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 <u>Philip Brown</u>	Title <u>Mr.</u>	
Business mailing address <u>P.O. Box 1251</u>		
City <u>Galveston</u>	State <u>TX</u>	Zip <u>77553</u>
Telephone Number <u>(409) 599-3579</u>		
Email Address <u>timbaventures@gmail.com</u>		

7. Commission contact person. List the name, business mailing address, telephone number, and email address for a person who Commission Staff may contact.

Name <u>Philip Brown</u>	Title <u>Mr.</u>	
Business mailing address <u>P.O. Box 1251</u>		
City <u>Galveston</u>	State <u>TX</u>	Zip <u>77553</u>
Telephone Number <u>(409) 599-3579</u>		
Email Address <u>timbaventures@gmail.com</u>		

AFFIDAVIT

My name is Willi Luthy. 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.

Willi Luthy

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

Willi Luthy

Printed Name

THE TEAM

Name of Registering Entity

Timbo Ventures, LLC

Sworn and subscribed before me this 17 day of June, 2021
Month Year

Ashly Haba

Notary Public in and For the State of TX

My commission expires on 4/10/24