

Filing Receipt

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ELECTRICITY BROKER REGISTRATION FORM

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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: adding a dba name and updating contact information					
2. Authorized Representative or Attorney to contact about this application:					
Name Carlos Guerra Title Manager					
Business Mailing Address 6800 South International Parkway, suite 10					
City McAllen State Texas Zip 78503					
Telephone Number 956 360 6499					
Email Address luis@interlps.com					
3. Registering Entity : List the registering entity's legal business name, mailing address, telephone number, and email address,					
Business Name					
Mailing address 6800 South International Parkway, suite 10					
City McAllen State Texas Zip 78503					
Telephone Number 956-36606499					
Email Address luis@interlps.com					

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 CG Energy Solutions	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 Luis Huerta	TitleSupervisor				
Business mailing address 6800 S. Internationa	al Pkwy Ste 10				
City McAllen	State Zip 78503 TX TX				
Telephone Number <u>956 3606499</u>					
Email Address Ihuerta@getgpower.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 Luis Cantu	Title Manager				
Business mailing address 6800 S. Internationa	al Pkwy Ste 10				
City McAllen	State Zip 78503 TX				
Telephone Number <u>956-360-6499</u>					
Email Address luis@interlps.com					

I

AFFIDAVIT

My name is Carlos A. Guerra _____. 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

Carlos A. Guerra Printed Name

CG Energy Solutions Name of Registering Entity

Sworn and su	bscribed before me this <u>13</u> day o	f <u>May</u>	<u>, 2022</u>
	ANATA	Month	Year
QUINTANILLA	Notary Public in and For the State of Tex	as	
c, State of Texas ires 04-09-2024	My commission expires on <u>479</u>	12024	

