



Filing Receipt

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ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:		
<input type="checkbox"/> This is a new broker registration		
<input type="checkbox"/> This supplies information for a pending broker registration		
<input checked="" type="checkbox"/> This amends an existing, completed broker registration		
Provide an explanation of the amendment: Renewal for registration for BR190063		
2. Authorized Representative or Attorney to contact about this application:		
Name Erica Jones	Title Owner	
Business Mailing Address PO Box 140598		
City Dallas	State Texas	Zip 75214
Telephone Number 214.597.2274		
Email Address erica@frozensgloryenergy.com		
3. Registering Entity: List the registering entity's legal business name, mailing address, telephone number, and email address.		
Business Name Erica Jones D/B/A Frozen Glory Energy Group		
Mailing address PO Box 140598		
City Dallas	State TX	Zip 75214
Telephone Number 214.597.2274		
Email Address erica@frozensgloryenergy.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.

1st <u>Frozen Glory Energy Group</u>	2nd <u>Frozen Glory Energy</u>
3rd _____	4th _____

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>Erica Jones</u>	Title <u>owner</u>
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Business mailing address PO Box 140598

City <u>Dallas</u>	State <u>TX</u>	Zip <u>75214</u>
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Telephone Number 214.597.2274

Email Address erica@frozensloryenergy.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 <u>Erica Jones</u>	Title <u>owner</u>
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Business mailing address PO Box 140598

City <u>Dallas</u>	State <u>TX</u>	Zip <u>75214</u>
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Telephone Number 214.597.2274

Email Address erica@frozenslory.com

AFFIDAVIT

My name is Erica Jones. I am the owner, partner, or an officer (Circle One) of the Applicant.

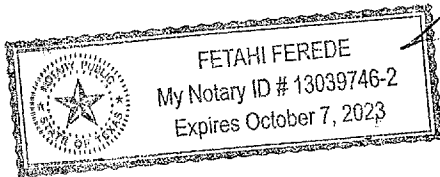
I swear or affirm that I have personal knowledge of the facts stated in the attached registration, that I am competent to testify to them, and that I have the authority to submit this application form on behalf of the registering entity. I further swear or affirm that the applicant is authorized to do 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.

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

ERICA JONES
Printed Name

ERICA JONES DBA Frozen Glory
Name of Registering Entity Energy

Sworn and subscribed before me this 29th day of June, 2022.
Month Year



Fetahi Ferede
Notary Public in and For the State of TEXAS
My commission expires on Oct 07, 2023