

Filing Receipt

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ELECTRICITY BROKER REGISTRATION FORM

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: Renewal of Texas Broker Registration BR 190065.

2. Authorized	Representative or	Attorney to	contact about	this annlication
	representative of	rationally to	contact about	uns application.

Name Robert O Almond		Title President			
Business Mailing Address 22 N Ridge Circle					
City Rockwall	State Texas	Zip <u>75087</u>			
Telephone Number 469-708-4691					
Email Address bob@roaservices.com					
3. Registering Entity : List the registering entity's legal business name, mailing address, telephone number, and email address.					
Business Name ROA Services, LLC					
Mailing address 22 N Ridge Circle					
City Rockwall	State Texas	Zip 75087			
Telephone Number469-708-4691					
Email Address bob@roaservices.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	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 Robert O. Almond	Title ^{President}					
Business mailing address 22 North Ridge Circl	e					
City Rockwall	State Texas	Zip <u>75087</u>				
Telephone Number 469-708-4691						
Email Address bob@roaservices.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 Robert O. Almond Title President						
Business mailing address 22 North Ridge Circle						
City Rockwall	State TX	Zip 75087				
Telephone Number 469-708-4691						
Email Address bob@roaservices.com						

AFFIDAVIT

My name is Robert O. Almond . 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

Robert O. Almond Printed Name

ROA Services, LLC Name of Registering Entity

worn and subscribed before me this <u>177</u> day of <u>Hugus</u> Month Year 1111881111 Notary Public in and For the State of My commission expires on 12-0