

Filing Receipt

Received - 2022-08-22 01:16:51 PM Control Number - 49779 ItemNumber - 2628



ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

| | | The second second | | | | | | | |
|--|---|-------------------|--------------------|--------------|--|-----------|--|--|--|
| 1. Check the m | iost appi | opriate box to | describe this sub | mission. | | | | | |
| □This is a no | is a new broker registration | | | | | | | | |
| □This suppl | supplies information for a pending broker registration | | | | | | | | |
| ☑This amen | amends an existing, completed broker registration | | | | | | | | |
| Provide an e | de an explanation of the amendment: | | | | | | | | |
| | ewing/updating my broker registration. My broker registration number is: BR190776 | | | | | | | | |
| Renewing/ut | ewingrupoating my broker registration, wy broker registration number is, bix 130770 | | | | | | | | |
| | | | | | | o supravç | | | |
| o i al estado | n) | | ney to contact all | .aufabia | is andication | | | | |
| | | ntanive of Autor | mey to contact at | outewins | and the second s | عراوين | | | |
| Name Tommy | Tran | | | | Title Manager | | | | |
| 1 1 1 1 1 1 | A 13 B | 27 Silver Cr | rown Trail | | | | | | |
| Business Maili | ng Addr | ess 27 Silver Cr | OWII ITAII | | | | | | |
| City Sugar Lar | nd | State TX | | Zip 7 | 77498 | | | | |
| | | | | | | | | | |
| Telephone Nu | lephone Number <u>(832)</u> 600-1750 | | | | | | | | |
| Email Address | Tomai Address Tomai Tran@gmail.com | | | | | | | | |
| Linan Audi ess | Email Address TommieTran@gmail.com | | | | | | | | |
| 3. Registering Entity: List the registering entity's legal business name, mailing address, telephone number, and | | | | | | | | | |
| 3. Registering Entity: List the acgustering charty sitegal outsiness marrie. That many actions site to the many control of t | | | | | | | | | |
| | | | | | | | | | |
| Business Name | siness Name Ingenious Logistics | | | | | | | | |
| Mailing address 27 Silver Crown Trl | | | | | | | | | |
| IVEZITARES AUGIC | 33 = 1 = 1 | | | | | | | | |
| City Sugar Lar | nd | State TX | | Zip <u>7</u> | 77498 | | | | |
| FILE B B.T. | 1 (00 | 20) 600 4750 | | J | | | | | |
| Telephone Number (832) 600-1750 | | | | | | | | | |
| Email Address | Email Address TommieTran@gmail.com | | | | | | | | |
| | | | | | | | | | |

| 4. Business structure. Select the form of business being registered. | | | | | | | |
|---|-----------------|------------------|--|--|--|--|--|
| ☐ Sole proprietor ☐ Corporation | ☐ Partnersh | ip | | | | | |
| ☑ 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 Tommy Tran | Title Manager | | | | | | |
| Business mailing address TommieTran@gmail | l.com | | | | | | |
| City Sugar Land | State TX | Zip <u>77498</u> | | | | | |
| Telephone Number (832) 600-1750 | | | | | | | |
| Email Address TommieTran@gmail.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 Tommy Tran | Title Manager | | | | | | |
| Business mailing address 27 Silver Crown Trl | | | | | | | |
| City Sugar Land | State TX | Zip <u>77498</u> | | | | | |
| Telephone Number <u>(832)</u> 600-1750 | | | | | | | |
| Email Address TommieTran@gmail.com | | | | | | | |

AFFIDAVIT

| My name is I am the owner, partner, or an officer (Circle One) of the Appl | licant. | | | | | | |
|---|--|--|--|--|--|--|--|
| I swear or affirm that I have personal knowledge of the facts stated in the attached registration, that competent to testify to them, and that I have the authority to submit this application form on behalf registering entity. I further swear or affirm that the applicant is authorized to do business in Texas all applicable laws and is in good standing with the Texas Secretary of State; that all statements may the application are true, correct and complete; and that any material changes in such information we provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the appunderstands and will comply with all requirements of the applicable law and rules, including cusprotection provisions, disclosure requirements, and marketing guidelines for retail electric service. | of the under ade in vill be olicant | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Signature of Registering Entity's Owner, Partner, or Officer | Signature of Registering Entity's Owner, Partner, or Officer | | | | | | |
| Tommy Tran | _ | | | | | | |
| Printed Name | | | | | | | |
| Ingenious Logistics | | | | | | | |
| Name of Registering Entity | | | | | | | |
| Sworn and subscribed before me this 22nd day of August, | 2072. | | | | | | |
| Month | Year | | | | | | |
| BRIANNA ALEXXIS FONSECA Notary ID #132045801 | | | | | | | |
| My Commission Expires Notary Public in and For the state of 12x203 | • | | | | | | |
| My commission expires on $\frac{10,2023}{10,2023}$ | ' | | | | | | |