

Filing Receipt

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Control Number - 49779

Item Number - 3490



ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

1. Check the most appropriate box to describe this sub	mission:		
☑This is a new broker registration			
☐This supplies information for a pending broker registr	ration		
☐This amends an existing, completed broker registration			
Provide an explanation of the amendment:	***		
2. Authorized Representative or Attorney to contact ab	out this application:		
Name Brittany Willette	Title Regulatory Compliance		
Business Mailing Address 185 International Drive			
City Portsmouth State NH	Zip 03801		
Telephone Number 603.530.4318			
Email Address bwillette@spragueenergy.com			
 Registering Entity: List the registering entity's legal by email address. 	isiness name, mailing address, telephone number, and		
Business Name Sprague Operating Resources LLC			
Mailing address 185 International Drive			
City Portsmouth State NH	Zip <u>03801</u>		
Telephone Number 603.431.1000			
Email Address bwillette@spragueenergy.com			

4. Business structure. Select the form of business being registered.			
☐ Sole proprietor ☐ Corporation	☐ Partnersh	nip	
☑ Limited Liability Company (LLC)	☐ Limited 1	Partnership	
5. Other Names. List any trade, commercial, at listed in #3 above, under which the registering e intends to operate must be registered with the Te	ntity intends t	o operate. Any name in which a corporation	
1st	2 nd		
3rd	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 Jonah Perez	Title Manage	er - Customer Care	
Business mailing address 185 International Drive			
City Portsmouth	State NH	Zip <u>03801</u>	
Telephone Number 866-477-7248			
Email Address customercareteam@spragueenergy.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 Brittany Willette	Title Regulatory Compliance		
Business mailing address 185 International Dri	ve		
City Portsmouth	State NH	Zip <u>03801</u>	
Telephone Number 603.430.5318			
Email Address bwillette@spragueenergy.com			

AFFIDAVIT

My name is Paul Scoff	. 1 am the owner, partner, or an officer (Circle One) of the Applicant.
competent to testify to them, and that registering entity. I further swear or all applicable laws and is in good sta the application are true, correct and oprovided to the Public Utility Commis understands and will comply with all	I knowledge of the facts stated in the attached registration, that I am I I have the authority to submit this application form on behalf of the affirm that the applicant is authorized to do business in Texas under anding with the Texas Secretary of State; that all statements made in complete; and that any material changes in such information will be ssion of Texas in a timely manner. I swear or affirm that the applicant II requirements of the applicable law and rules, including customer airements, and marketing guidelines for retail electric service.
•	-, 11
	- Vint Swiff
	Signature of Registering Entity's Owner, Partner, or Officer
	Paul Scoff
	Printed Name
	Sprague Operating Resources LLC
	Name of Registering Entity
Sworn and	d subscribed before me this 7 day of June , 2023.
	Month Year
	Notary Public in and For the State of Non Hampsmin E.
	My commission expires on $\frac{12-18-25}{2}$.