

## **Filing Receipt**

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Control Number - 49779

Item Number - 3743



## **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:
2. Authorized Representative or Attorney to contact about this application:
Name CHARLIE LAID Title OWNER
Business Mailing Address 14203 WYNOHAM TERMACE TAL.
City Houston State TX Zip 77059
Telephone Number 713-385-7000
Email Address Charlie Zaid @ gnail. com
ar <b>Registering Entity</b> : List the registering entity's legal business name, mailing address, telephone number, and semail address
Business Name CHABLIE 7 ALO
Mailing address 14203 WYNDAM TERMACE TRL.
City Houston State TEXAS Zip 77059
Telephone Number 713-385-7000
Email Address

□ Limited Liability Company (LLC) □ Limited Partnership  5. Other Names: List any trade, commercial, and doing-business-as (db/a) names, other than the local name listed in #5 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	8.58E.90
5. Other Names. List any trade, commercial, and doing-business-as (d/b/a) names, other than the local names 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	
Instead 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	
Intends to operate must be registered with the Texas Secretary of State.  1st	
3rd	
6. Customer Service Contact. List the telephone number, business mailing address, and email address of the	
6 Customer Service Contact. List the telephone number, business mailing address, and email address of the	
then provide the name, title, business mailing address, email address, and telephone number of the customer scryice contact person.	
Name CHANLIE FAID Title OWNER	
Business mailing address	
City Houston State Zip 77059	
Telephone Number 713-385-7000	
Email Address Charlie Zaid @ gnail. con	
7: Commission contact person. List the name, business mailing address, telephone number, and cutail address for a person who Commission Staff may contact.	
Name CHARLIE ZAID Title OWNER	
Business mailing address 14203 Wyndham Terrace Tr)	
City Hous Tou/ State, Zip 77059	
Telephone Number 713-185-7006	
Email Address Charlie Zaid @ gmail. com	

## AFFIDAVIT

My name is Charlie Zeich. Lam 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 Jexas 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 Hillity 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 Tyfility's Owner, Partner, or Officer
Printed Name
Name of Registering Entity

Samantha Zard
Vy Commission Expens
02/08/2025
10 No. 132916665

Sworn and subscribed before me this 30 day of NOVEMBER 20.23

AIGHI

Year

Notary Public in and For the State of

My commission expires on