



Filing Receipt

Filing Date - 2024-03-12 01:58:30 PM

Control Number - 49779

Item Number - 3920



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:

BR230186 - Updates to Contact Information, Email Addresses, Street Name spelling corrections

2. Authorized Representative or Attorney to contact about this application:

Name Darrin Lewis

Title Partner

Business Mailing Address 7524 Mosier View Ct. Suite 150

City Fort Worth

State Texas

Zip 76118

Telephone Number 817-459-7545

Email Address darrin.lewis@utilitiesnow.com

3. Registering Entity: List the registering entity's legal business name, mailing address, telephone number, and email address.

Business Name _____

Mailing address 7524 Mosier View Ct. Suite 150

City _____

State _____

Zip _____

Telephone Number _____

Email Address _____

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 _____ Title _____

Business mailing address 7524 Mosier View Ct. Suite 150

City _____ State _____ Zip _____

Telephone Number _____

Email Address operations@utilitiesnow.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 Darrin Lewis Title Partner

Business mailing address 7524 Mosier View Ct. Suite 150

City Fort Worth State Tx Zip 76118

Telephone Number 817-459-7545

Email Address regulatory@utilitiesnow.com

AFFIDAVIT

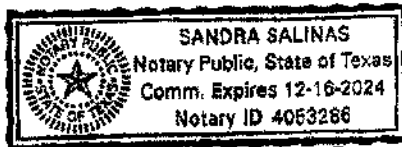
My name is Darrin Lewis. I am the owner, partner, or an officer (Circle One) of the Applicant.

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.

Darrin Lewis
Signature of Registering Entity's Owner, Partner, or Officer

Darrin Lewis
Printed Name

Utilities Now, LLC
Name of Registering Entity



Sworn and subscribed before me this 8th day of MARCH, 2024.
Month Year

Sandra Salinas
Notary Public in and For the State of Texas
My commission expires on 12-16-2024