



Control Number: 49779



Item Number: 445

Addendum StartPage: 0



2018 APR 22 11 05

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 <u>Peter Buell</u>		Title <u>CEO</u>
Business Address <u>5336 ALPHA RD # 3</u>		
City <u>DALLAS</u>	State <u>TX</u>	Zip <u>75240</u>
Telephone Number <u>214-794-3722</u>		
Email Address <u>PBUELL@GMAIL.COM</u>		

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

Name <u>ELECTRICITY MANAGEMENT SERVICES LLC DBA EVERGREEN PS</u>		
Business address <u>5336 ALPHA RD #3</u>		
City <u>DALLAS</u>	State <u>TX</u>	Zip <u>75240</u>
Telephone Number <u>214-794-3722</u>		

4. Type of organization of registering entity.

Sole proprietor Other

Corporation

Limited Liability Company, L.L.C

Limited Partnership

445

5. Description of the brokerage services provided by the registering entity and type of customers served.

Description of Services:

MANAGEMENT SERVICES

Types of Customers: Check all that apply

- Residential Industrial Other
 Commercial Municipalities

6. 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 Secretary of State.

1 st	2 nd
<u>EVERGREEN POWER SOLUTIONS</u>	
3 rd	5 th

7. Officers. Provide, as Attachment A, the names, business addresses, email addresses, and phone numbers of the registering entity's officers, directors, and partners, as applicable.

Attachment A

8. Customer Service Contact. List the telephone number 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, address, email address, and telephone number of the customer service contact person.

Customer Service Department	Telephone Number	Email Address
	<u>888-886-6586</u>	<u>PBUELL62@gmail.com</u>
Name	Title	
<u>Peter Buell</u>	<u>CEO</u>	
Business address	<u>5336 ALPHA RD #3</u>	
City	State	Zip
<u>DALLAS</u>	<u>TX</u>	<u>75240</u>
Telephone Number	<u>214-794-3722</u>	
Email Address	<u>PBUELL62@gmail.com</u>	

9. Regulatory contact person. List the name, physical business address, telephone number, and email address for a regulatory contact person

Name	Title	
<u>Peter Buell</u>	<u>CEO</u>	
Business address	<u>5336 ALPHA RD #3</u>	
City	State	Zip
<u>DALLAS</u>	<u>TX</u>	<u>75240</u>
Telephone Number	<u>214-794-3722</u>	
Email Address	<u>pbuell62@gmail.com</u>	

10. Secretary of State Record. Entities who must register with the Secretary of State must provide a copy of the certificate of status issued by the Texas Secretary of State certifying that the registering entity is authorized to transact business in Texas.

Copy of Secretary of State certificate of status is attached.



Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Electricity Management Services, LLC (file number 802019233), a Domestic Limited Liability Company (LLC), was filed in this office on June 30, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 19, 2019.



A handwritten signature in black ink, appearing to read "Jose A. Esparza".

Jose A. Esparza
Deputy Secretary of State

AFFIDAVIT

My name is Peter Bull. I am the CEO of the Registering Entity.

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 all statements made in the Registration Form are true, correct and complete and that any substantial changes in such information will be provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the registering entity 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.

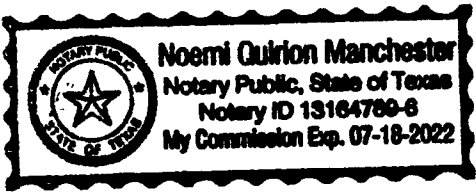
Peter Bull
Signature of Registering Entity's Owner, Partner, or Officer

Peter Bull
Printed Name

Electricity Management Services LLC
Name of Registering Entity

Sworn and subscribed before me this 19 day of August, 19.
Month Year

Noemi Quirion Manchester
Notary Public in and For the State of TEXAS
My commission expires on 7/18/2022



Attachment A

**Electricity Management Services LLC
DBA: Evergreen Power Solutions
5336 Alpha Rd #3
Dallas Tx 75240**

Officers – Directors -and Partners as applicable

**Peter Buell
5336 Alpha Rd #3
Dallas Tx 75240
214-794-3722
pbuell62@gmail.com**

**Jason Fondren
5336 Alpha Rd #3
Dallas Tx 75240
214-732-4394
jfondren@electricitymanagementservices.com**

**Joseph Hollinshead
5336 Alpha Rd #3
Dallas Tx 75240
214-316-0214
jhollinshead@electricitymanagementservices.com**