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ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:							
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 Brian Spross			Title Organizer				
Business Mailing Add	Business Mailing Address 1605 Lakecliff Hills Ln, Suite 100						
City Austin	State TX	Zip 7	ip 78732				
Telephone Number (512)656-7960							
Email Address brian.spross@jonesspross.com							
3. Registering Entity: List the registering entity's legal business name, mailing address, telephone number, and email address.							
Business Name CSC Energy Partners LLC							
Mailing address 26077 Nelson Way #1407							
City Katy	State TX	Zip 7	7494				
Telephone Number 954-614-4623							
Email Address loenismassey@gmail.com							

4. Business structure. Select the form of business being registered.						
☐ Sole proprietor ☐ Corporation	□ Partners	hip				
☑ 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 Loenis Massey	Title President					
Business mailing address 26077 Nelson Way #1407						
City Katy	State TX	Zip 77494				
Telephone Number 954-614-4623						
Email Address loenismassey@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 Loenis Massey	Title President					
Business mailing address 26077 Nelson Way #1407						
City Katy	State TX	Zip 77494				
Telephone Number 954-614-4623						
Email Address loenismassey@gmail.com						

AFFIDAVIT

My name is LOENIS Massey. 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.

	Printed Nat	f Registering Entity's (Jey Owner, Partner, or Office assey Partners	
RIGOBERTO Notary ID #126	427133	Toll S	day of Mondo	, <u>Z0Z</u> \$ Yea
My Commission June 30, 20	Expires Notary Pub	ssion expires on	of lexas	28