

Filing Receipt

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Control Number - 49779

Item Number - 5011



ELECTRICITY BROKER REGISTRATION FORM

PROJECT NO. 49779

1. Check the most appropriate box to describe this sul	bmission:			
☐This is a new broker registration				
☐This supplies information for a pending broker regis	tration			
☑ This amends an existing, completed broker registrat	ion			
Provide an explanation of the amendment: Renewal				
2. Authorized Representative or Attorney to contact a	about this application:			
Name Newell Sooklal	Title			
Business Mailing Address 3502 Walker Falls Ln				
City Fulshear State TX	Zip <u>77441</u>			
Telephone Number 210-343-5544				
Email Address texasenergyforever@gmail.com				
3. Registering Entity: List the registering entity's legal bemail address.	ousiness name, mailing address, telephone number, and			
Business Name Texas Energy Forever DBA				
Mailing address 3502 Walker Falls Ln				
City Fulshear State TX	Zip 77441			
Telephone Number 210-343-5544				
Email Address texasenergyforever@gmail.com				

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, a listed in #3 above, under which the registering e intends to operate must be registered with the To	ntity intends t	ness-as (d/b/a) names, other than the legal name of operate. Any name in which a corporation of State.
1 st	2 nd	
3rd	4 th	
customer service department. If the registering then provide the name, title, business mailing as service contact person. Name Newell Sooklal	entity does no ldress, email a	isiness mailing address, and email address of the thave a dedicated customer service department, address, and telephone number of the customer tions Manager
Business mailing address 3502 Walker Falls L	.n	
City Fulshear	State TX	Zip <u>77441</u>
Telephone Number 210-343-5544		
Email Address texasenergyforever@gmail.com	m	
7. Commission contact person. List the name for a person who Commission Staff may contact		iling address, telephone number, and email address
Name Newell Sooklal	Title Operations Manager	
Business mailing address 3502 Walker Falls I	n .	
City Fulshear	State TX	Zip <u>77441</u>
Telephone Number 210-343-5544		
Email Address texasenergyforever@gmail.co	m	

AFFIDAVIT

My name is Newell Sooklal	I 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 stathe application are true, correct and opprovided to the Public Utility Commisunderstands and will comply with all	I knowledge of the facts stated in the attached registration, that I am 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 requirements of the applicable law and rules, including customer tirements, and marketing guidelines for retail electric service.
	P. Lell
	Signature of Registering Entity's Owner, Partner, or Officer NEWBLL SOOKLAL
	Printed Name Printed Name
	Name of Registering Entity
Sworn and	I subscribed before me this 4 day of 509 tracker, 2025
KOB LOADING	Month Year Notary Public in and For the State of T(,\(\times\)(\(\times\)) My commission expires on \(\times\)(\(\times\)(\(\times\))