



## **Filing Receipt**

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**Control Number - 49779**

**Item Number - 5019**



## 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 Jacob Greek Title Partner

Business Mailing Address 11740 Katy Fwy, Suite 1700

City Houston State TX Zip 77079

Telephone Number 361-306-3621

Email Address jacob.greek@vpptexas.com

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

Business Name VPP Texas

Mailing address 361-306-3621

City Houston State TX Zip 77079

Telephone Number 361-306-3621

Email Address jacob.greek@vpptexas.com

<b>4. Business structure.</b> Select the form of business being registered.		
<input type="checkbox"/> Sole proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
<input checked="" type="checkbox"/> Limited Liability Company (LLC)	<input type="checkbox"/> Limited Partnership	
<b>5. Other Names.</b> 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 <sup>st</sup> _____	2 <sup>nd</sup> _____	
3 <sup>rd</sup> _____	4 <sup>th</sup> _____	
<b>6. Customer Service Contact.</b> 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 <u>Jacob Greek</u>		Title <u>Account Executive</u>
Business mailing address <u>11740 Katy Fwy, Suite 1700</u>		
City <u>Houston</u>	State <u>TX</u>	Zip <u>77079</u>
Telephone Number <u>346-742-0653</u>		
Email Address <u>jacob@vpptexas.com</u>		
<b>7. Commission contact person.</b> List the name, business mailing address, telephone number, and email address for a person who Commission Staff may contact.		
Name <u>Jacob Greek</u>		Title _____
Business mailing address <u>11740 Katy Fwy, Suite 1700</u>		
City <u>Houston</u>	State <u>TX</u>	Zip <u>77079</u>
Telephone Number <u>346-742-0653</u>		
Email Address <u>jacob@vpptexas.com</u>		

## AFFIDAVIT

My name is Jacob Greek. 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.

Jacob Greek

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

Jacob Greek

Printed Name

VPP Texas

Name of Registering Entity

Sworn and subscribed before me this

30<sup>th</sup> day of Sept. 2020  
Month Year

Linda Obregon

Notary Public in and For the State of

Texas

My commission expires on

10/19/2025

