

license**logix**

NHPUC 6FEB14rw2:20

February 3, 2014

New Hampshire Public Utilities Commission
Debra Howland, Executive Director
21 South Fruit Street, Suite 10
Concord, NH 03301-2429

Re: **Application for Electric Broker License
Trusted Energy LLC**

To Whom It May Concern:

Enclosed please find an **Application for Electric Broker License** that was completed for our client, **Trusted Energy LLC**. Once the application has been processed, please forward evidence of approval to the mailing address on the application.

If there is any issue, or if you require any further information, please do not hesitate to contact me.

Thank you,

Shayna Desai
LicenseLogix
150 Grand Street, 4th Floor
White Plains, NY 10601
sdesai@licenselogix.com
(800) 292-0909 x303

**New Hampshire Public Utilities Commission
Debra Howland, Executive Director
21 South Fruit Street, Suite 10
Concord, NH 03301-2429**

APPLICATION FOR ELECTRIC BROKER LICENSE

(1) The legal name of the applicant as well as any trade name(s) under which it intends to operate in this state;

Trusted Energy LLC

(2) The applicant's business address, telephone number, e-mail address and website address, as applicable;

15643 Sherman Way Boulevard, Suite 350, Van Nuys, CA 91406
(818) 646-3137
nathan@trustedenergyllc.com
www.trustedenergyllc.com

(3) The name(s), title(s), business address(es), telephone number(s), and e-mail address(es) of the applicant if an individual or of the applicant's principal(s), if the applicant is anything other than an individual;

Nathan Cartwright
Owner
15643 Sherman Way Boulevard, Suite 350, Van Nuys, CA 91406
(818) 646-3137
nathan@trustedenergyllc.com

(4) The telephone number of the customer service department or the name, title, telephone number and e-mail address of the customer service contact person of the applicant, including toll free telephone numbers if available;

Nathan Cartwright
Owner
(818) 646-3137
nathan@trustedenergyllc.com

(5) A copy of the applicant's authorization to do business in New Hampshire from the secretary of state, if anything other than an individual;

Attached as EXHIBIT A

(6) Description of the geographic areas of New Hampshire in which the applicant intends to provide service, consistent with Puc 2006.01(a)(10) above;

Applicant is currently applying for licensure in Delaware, Illinois, Massachusetts, Maryland, Maine, New Jersey, Ohio and Pennsylvania.

(7) A statement that the applicant is not representing any supplier interest or a listing of any supplier interest the applicant intends to represent; and

Applicant is not representing any supplier interest or a listing of any supplier interest the Applicant intends to represent.

(8) Except as provided in 2003.04(e), payment of the required filing fee; and

A \$250 check is enclosed.

(9) The signature of the applicant or its representative.

Sign: 

Date: 1.15.14

EXHIBIT A



State of New Hampshire
Department of State
Corporation Division
603-271-3244



Important Registration Information

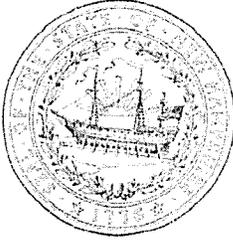
Enclosed please find your acknowledgement of this office's receipt and processing of your registration documents.

This entity is required to file an annual report and pay a \$100.00 filing fee annually which is due by April 1st of each year beginning with the year following business registration. Reports filed after the due date will be assessed a late fee of \$50.00. Annual reports may be filed on-line or downloaded from our website at http://sos.nh.gov/corp_div.aspx. If you are unable to obtain a report through our website, you should contact the Corporation Division to request one. As a courtesy, our office will send a notice to the entity reminding you of your obligation to file an annual report. Please sign up to receive the reminder by e-mail @ the above website if you have not already done so; otherwise the reminder will be mailed to the entity's business address. **HOWEVER, IT IS THE RESPONSIBILITY OF THE ENTITY TO OBTAIN A REPORT AND SUBMIT FOR FILING PRIOR TO APRIL 1ST OF EACH YEAR.**

Should you have any questions, you may contact the Corporation Division at the above number or email us at Corporate@sos.state.nh.us. Please reference your Business ID # located in the filed section of the enclosed acknowledgement copy.

PLEASE NOTE: ENTITIES THAT DO NOT FILE ANNUAL REPORTS AND/OR FEES WILL BE ADMINISTRATIVELY DISSOLVED or SUSPENDED.

Mailing address: 107 North Main Street, State House room 204, Concord, N.H. 03301-4989
Physical Location: 25 Capitol Street, State House Annex – 3rd Floor, Concord NH
Website – http://sos.nh.gov/corp_div.aspx



State of New Hampshire

Department of State
Corporation Division

603-271-3246



Enclosed is the acknowledgment copy of your Application for Registration as a Foreign Limited Liability Company. It acknowledges this office's receipt and filing of your documents.

Should you have any questions, you may contact the Corporation Division at the above number or email us at corporate@sos.state.nh.us. Please reference your Business ID # located in the filed section of the enclosed acknowledgement copy of Application for Registration as a Foreign Limited Liability Company.

Please visit our website for helpful information regarding all your business needs.

Regards,

New Hampshire Department of State
Corporation Division

Business ID#: 703597

State of New Hampshire

Filing fee: \$ 50.00
Fee for Form SRA: \$ 50.00
Total fees: \$100.00
Use black print or type.

Form FLLC-1
RSA 304-C:175

APPLICATION FOR REGISTRATION AS A FOREIGN LIMITED LIABILITY COMPANY

PURSUANT TO THE PROVISIONS of the New Hampshire Limited Liability Company laws, the undersigned hereby applies for registration to transact business in New Hampshire and for that purpose submits the following statement:

FIRST: The name of the limited liability company is Trusted Energy LLC

SECOND: The name which it proposes to register and do business in New Hampshire is Trusted Energy LLC

THIRD: It is formed under the laws of Texas

FOURTH: The date of its formation is 4/1/2010

FIFTH: The nature of the business or purposes to be conducted or promoted in New Hampshire is Out-of-state electric and gas energy broker

SIXTH: The name of its registered agent in New Hampshire is Paracorp Incorporated

and the **street address**, town/city (including zip code and post office box, if any) of its registered office is (agent's business address in New Hampshire) 1 Old Loudon Road, Concord, NH 03301

SEVENTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

State of New Hampshire
Form FLLC 1 - Application for Foreign Registration FLLC 3 Page(s)



T1402925029

APPLICATION FOR REGISTRATION AS A
FOREIGN LIMITED LIABILITY COMPANY

Form FLLC-1
(Cont.)

*Signature:



Print or type name: Nathan Cartwright

Title: Member

Date signed: 1.15.14

Complete address of person signing: 15643 Sherman Way Boulevard

Suite 350

Van Nuys, CA 91406

To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here:
nathan@trustedenergyllc.com

* Shall be executed on behalf of the foreign limited liability company by a person with authority to do so under the laws of the state or other jurisdiction of its formation, or, if the foreign limited liability company is in the hands of a receiver, executor, or other court appointed fiduciary, trustee, or other fiduciary, it must be signed by that fiduciary.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, **DATED AND SIGNED ORIGINAL AND FORM SRA** to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989. Physical location: 25 Capitol Street, 3rd Floor, Concord, NH 03301.

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: Trusted Energy LLC

Business Address (include city, state, zip): 15643 Sherman Way Boulevard, Suite 350, Van Nuys, CA 91406

Telephone Number: 818-646-3137 E-mail: nathan@trustedenergyllc.com

Contact Person: Nathan Cartwright

Contact Person Address (if different): _____

Part II – Check ONE of the following items in Part II. If more than one item is checked, the form will be rejected. [PLEASE NOTE: Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. However, you must insure that your business meets all of the requirements spelled out in A), B), and C)]:

1. Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets ALL of the following three requirements:
 - A) This business has **10 or fewer owners**; and
 - B) Advertising *relating to the sale of ownership interests* has not been circulated; and
 - C) Sales of ownership interests – if any – will be **completed within 60 days** of the formation of this business.
2. This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____.
3. This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____.
4. This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

Part III – Check ONE of the following items in Part III:

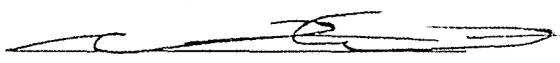
1. This business **is not being** formed in New Hampshire.
2. This business **is** being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures **only**)

Name (print): Nathan Cartwright

Signature: 

Date signed: 1.15.14

Name (print): _____

Signature: _____

Date signed: _____

Name (print): _____

Signature: _____

Date signed: _____