

licenseologix

NHPUC 13OCT'16AM11:34

October 6, 2016

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

Re: **Natural Gas License Renewal Notice
Front Line Power Solutions, LLC**

To Whom It May Concern:

Enclosed please find a **Natural Gas Broker Renewal Notice** submitted on behalf of our client, **Front Line Power Solutions, 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
140 Grand Street, Suite 300
White Plains, NY 10601
sdesai@licenseologix.com
(800) 292-0909 x303

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

RENEWAL APPLICATION FOR GAS 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;

Front Line Power Solutions, LLC

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

251 Thames St, Bristol, RI 02809
(401) 474-4776
john@frontlinepowersolutions.com
<http://www.frontlinepowersolutions.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;

John T. Holmes
CEO
251 Thames St, Bristol, RI 02809
(401) 474-4776
john@frontlinepowersolutions.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;

John T. Holmes
CEO
(401) 474-4776
john@frontlinepowersolutions.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) A list of CNGSSs in New Hampshire through which applicant intends to provide service;

Constellation Energy Group, Direct Energy, Verde Energy, Nextera Energy, Inc.,
Aequitas Energy.

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

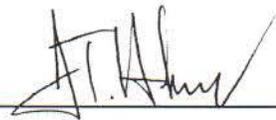
Applicant is not representing any CNGS interests.

(8) Payment of the required filing fee; and

A \$250 check is enclosed.

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

Sign: _____

A handwritten signature in black ink, appearing to be "A. H. Adams", written over a horizontal line.

Date: _____

7/19/2016

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Front Line Power Solutions, LLC a(n) Rhode Island limited liability company registered to do business in New Hampshire on July 15, 2014. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 4th day of August, A.D. 2014

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State



State of New Hampshire
New Hampshire Department of State
William M. Gardner
Secretary of State

Invoice Number: 6019263

Invoice Date: 08/04/2014 09:09 AM

User ID: 487

Billing Information

LicenseLogix, LLC
150 Grand Street 4th Floor
White Plains, NY 10601

Product Description	Certification Number	Order Date	Qty	Pages	Item Cost	Extended	Amount Due
Corp Copies - Certificates Re: LicenseLogix, LLC Contact: LicenseLogix, LLC Shipped Via: Mail	4642624	08/04/2014	1	1	5.00	5.00	Paid

Credit Balance as of 08/04/2014 10:52 AM: \$0.00

Payment Details:

Check #3939 for \$5.00(4642624:\$5.00,)

Contact(s): None specified

Invoice Total:	\$5.00
Payment Total:	\$5.00
Amount Due:	\$0.00

Include invoice number on all correspondence and send to:

New Hampshire Department of State
Attn: Accounts Receivable
107 N. Main St.
Concord, NH 03301

For questions regarding this invoice, contact Accounts Receivable at:

(603) 271-3242