NHPLIC 25MAY 16AH11:00

May 21st 2016

State of New Hampshire Public Utilities Commission 21 South Fruit Street, Suite 10 Concord, NH 03301

Dear Sir/Madam:

Enclosed is the documentation to register our company as an aggregator of electricity in the state of New Hampshire.

- 1. Notice of Intent by Aggregator
 - a. Original
 - b. 2 copies of original
 - c. An electronic copy of form 2006.02 on USB
- 2. Check in the amount of \$250.00 for registration fee.
- 3. Copy of Certificate of Authority to do business in New Hampshire
- 4. Please accept this statement as our admittance of compliance with the terms and conditions stated in Puc 2003.04.

Please contact Justin Vissat at 203-848-5272 is you need any additional information.

Thank you for your assistance with this process.

Sincerely,

Justin Vissat

NOTICE OF INTENT BY AGGREGATOR

(1) Legal name:

Strategic Energy Partners, LLC

(2) Address:

900 Chapel Street, Suite 201. New Haven, CT 06510

Telephone:

(203) 672-1340

Fax:

(203) 916-1023

Email:

bmc@sepllc.net

(3) Principal Officers:

Name:

Justin P. Vissat

Title:

President

Phone:

203-672-5962

Fax:

203-916-1023

Address: Email:

900 Chapel Street, Suite 201. New Haven, CT 06510

jpv@sepllc.net

Name:

Brian M. Choquette

Title:

Vice President

Phone:

203-672-6605

Fax:

203-916-1023

Address:

900 Chapel Street, Suite 201. New Haven, CT 06510

Email:

bmc@sepllc.net

(4) Toll Free Number:

203-672-1340 (Customer Service)

(5) Certificate of Authority:

Please see attached (Business ID#741491)

(6) Geographic Areas:

Entire State

(7) Supplier Interest:

Strategic Energy Partners LLC does not represent any

supplier interest.

(8) Filing Fee:

Check for \$250.00 enclosed

(9)

Justin P. Vissat

Strategic Energy Partners LLC 900 Chapel Street APT 201 New Haven, CT 06510



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 <u>corporate@sos.state.nh.us</u>. 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#: 741491



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 <u>Corporate@sos.state.nh.us</u>. 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.

State of New Hampshire

Filed
Date Filed: 03/28/2016
Business ID: 741491
William M. Gardner
Secretary of State

Filing fee: \$100.00 Use black print or type.

Form FLLC-1 RSA 304-C:175

APPLICATION FOR REGISTRATION AS A FOREIGN LIMITED LIABILITY COMPANY

FIRST: The name of the limited liability company is Strateg	gic Energy Partners LLC)	
	The state of the s		
SECOND: The name which it proposes to register and do t	ousiness in New Hamps	shire is	
Strategic Energy Partners LLC			and the second of the second o

Principal Business Inf	formation:		
Principal Office Address: 900 Chapel Street Apt 201		CT	06510
(no. & street)	(city/town)	(state)	(zip code)
Principal Mailing Address (if different): (no. & street)	(city/town)	(state)	(zip code)
Business Phone: (203) 848-5272			
Business Email: jpv@sepllc.net			
Please check if you would prefer to receive the Ann		otica by am	oil
I leade these if you would prote to receive the rust	dai report reminder in	dice by ciri	Cati.
THIRD: It is formed under the laws of Connection	cut		
THIRD: It is formed under the laws of Connection	cut		
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FOURTH: The date of its formation is April 30, 2015	*	ated in New	Hampshire
FOURTH: The date of its formation isApril 30, 2015 FIFTH: Describe the nature of the business or purposes to	be conducted or promo		
FOURTH: The date of its formation isApril 30, 2015 FIFTH: Describe the nature of the business or purposes to (and if known, list the NAICS Code and Sub Code): Energy	be conducted or promo	ing	
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Page 1 of 2

Form FLLC-1

*Signature: Print or type name: Title:	Justin P. Vissat Product / CEO
Date signed:	3-25-2016
Complete address of person signing:	-900 Chapel Street
	Apt 201
	New Haven, CT 06510

Note: The sale or offer for sale of membership interests of the limited liability company will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B). The membership interests of the limited liability company: 1) have been registered or when offered will be registered under RSA 421-B; 2) are exempted or when offered will be exempted under RSA 421-B; 3) are or will be offered in a transaction exempted from registration under RSA 421-B; 4) are not securities under RSA 421-B; OR 5) are federal covered securities under RSA 421-B. The statement above shall not by itself constitute a registration or a notice of exemption from registration of securities within the meaning of sections 448 and 461(i)(3) of the United States Internal Revenue Code and the regulation promulgated thereunder.

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

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989 Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH

^{*} 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.



SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 05115-0470 DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 05105 PHONE: 860-509-6003 WEBSITE: WWW.concord-sots.ct.cov

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY - DOMESTIC

C.G.S. §§34-120; 34-	121	TMC #000522517	0.00				
USE INK. COMPLET	E ALL SECTIONS. PRINT OR TYPE. ATTAC	ING #000532517 FILED 04/30	/2015 03:19 PM PAGE 03664				
FILING PARTY	(CONFIRMATION WILL BE SENT TO THIS	CONNECTICUT	RETARY OF THE STATE SECRETARY OF THE STATE				
NAME: Steve	en C. Miller	*	OF THE STATE				
ADDRESS:PO B	ox 26		O' TIL STATE				
*							
CITY: Plain	ville						
STATE: CT		ZIP:06062					
1. NAME OF LI	MITED LIABILITY COMPANY - REQUIRE	D: (MUST INCLUDE BUS	SINESS DESIGNATION I.E. LLC, L.L.C., ETC.)				
Strategic F	Strategic Energy Partners LLC						
2. DESCRIPTIO	ON OF BUSINESS TO BE TRANSACTED	OR PURPOSE TO B	E PROMOTED - REQUIRED:				
	SHEETS IF NECESSARY.						
	*						
Energy Aggi	regation and Consultation Services						
	CIPAL OFFICE ADDRESS - REQUIRED:	(NO P.O. BOX) PROVIDE FUL	LL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE.				
ADDRESS:	22 Pine Street, Suite 103C						
CITY:	Bristol						
	A000000						
STATE:	ст		ZIP: 06010				
4. MAILING ADDRESS, IF DIFFERENT THAN #3: PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE. ADDRESS: 22 Pine Street, Suite 103C							
CITY:	Bristol						
STATE:	CT		ZIP: 06010				
	NT OF STATUTORY AGENT FOR SERVI	CE OF PROCESS -					
A. IF AGEN	T IS AN INDIVIDUAL.						
PRINT OR TY	PE FULL LEGAL NAME:		*				
Steven C. Miller							
BUSINESS ADD			SIDENCE ADDRESS				
(P.O. BOX NOT A	CCEPTABLE) IF NONE, MUST STATE "NONE	P.O. BOX NOT ACC	EPTABLE)				
ADDRESS: None		ADDRESS: 460 Cook	Hill Road				
36							
CITY:	.*	CITY: Cheshire	×				
STATE:		STATE: CT	¥				
ZIP:		ZIP: 06410					
OLONIA THOS: A O	CENTING ASSOCIATION	1	///				
SIGNATURE ACCEPTING APPOINTMENT: 4/28/2015							
		<u> </u>	FORM LC-1-1.0				
DACE 1 DE 2			1 01/141 50-1-1-0				

Rev. 1/1/2015

B. IF AGENT IS A BUSIN		F	ILED 04/30/2015 03	OF THE STATE
PRINT OR TYPE NAME OF	BUSINESS AS IT API	PEARS	ON OUR RECORDS:	
	**			*
CT BUSINESS ADDRESS (P	O.BOX UNACCEPTABLE)			
ADDRESS:				
CITY:				
STATE:	DRAINTEET AN DE		ZIF) ,
SIGNATURE ACCEPTING A	PPOINTMENT ON BE	HALF	OF AGENT:	
•				
PRINT NAME & TITLE OF PI	ERSON SIGNING:			
	* *			Į.
6. MANAGER OR MEMBER I				ANAGER OR MEMBER OF THE LLC.)
	ATTACH 81/2	X 11 SH	EETS IF NECESSARY.	
	777.5	BI	USINESS ADDRESS	RESIDENCE ADDRESS:
NAME	TITLE	IFN	(No. P.O Box) ONE, MUST STATE "NONE"	(No. P.O Box)
Steven C. Miller	Member	None		460 Cook Hill Road
Otto C. Imag		,,,,,,,		Cheshire, CT 06410
•	-			*
* .			*	
	1	L		
7. MANAGEMENT - PLACE A				
MANAGEMENT OF THE	E LIMITED LIABILITY	COMP.	ANY SHALL BE VESTED	IN A MANAGER OR MANAGER
8. ENTITY EMAIL ADDRESS	-REQUIRED: (IF NO	JE, MUS	T STATE "NONE.")	itisalatan matindia alikulu puolisia valta en arma valaben arma varta en pavalta en et esta en esta en esta en
Stevenmiller23@gmail.com	i			
9. EXECUTION: (SUBJECT TO)		TEMENT		
DATED THIS 28th	DAY OF			2015
NAME OF OF			SI	GNATURE
(PRINT OF	(1175)			· · · · · · · · · · · · · · · · · · ·
Steven (Miller		4	
				fine.
AN ANNUAL REPORT WILL BE DUE Y EASILY FILED ONLINE @ <u>WWW.COM</u> CONTACT YOUR TAX ADVISOR OR T POTENTIAL TAX LIABILITY RELATING TAX PAYER SERVICE CENTER: (800)	cord-sots ct.gov THE TAXPAYER SERVICE S TO YOUR BUSINESS, IN	CENTER	AT THE DEPARTMENT OF RE G QUESTIONS ABOUT THE BU	

PAGE 2 OF 2

FORM LC-1-1.0 Rev. 1/1/2015

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

STRATEGIC ENERGY PARTNERS LLC

a domestic limited liability company, were filed in this office on April 30, 2015.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: March 04, 2016

Business ID: 1173806

Express

Certificate Number: 2016067071001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov