



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
400 NORTH STREET, HARRISBURG, PA 17120

Version
Revised

06/14/17

BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

Application of NRG Kiosk d/b/a Power Kiosk for approval to offer, render, furnish, or supply electricity or electric generation services as a(n) *Energy Broker / Consultant* to the public in the Commonwealth of Pennsylvania (Pennsylvania).

To the Pennsylvania Public Utility Commission:

1. IDENTIFICATION AND CONTACT INFORMATION

- a. **IDENTITY OF THE APPLICANT:** Provide name (including any fictitious name or d/b/a), primary address, web address, and telephone number of Applicant:

Power Kiosk LLC
350 N LaSalle Street 9th Floor Chicago IL 60654

powerkiosk.com
855-475-4675

- b. **PENNSYLVANIA ADDRESS / REGISTERED AGENT:** If the Applicant maintains a primary address outside of Pennsylvania, provide the name, address, telephone number, and fax number of the Applicant's secondary office within Pennsylvania. If the Applicant does not maintain a physical location within Pennsylvania, provide the name, address, telephone number, and fax number of the Applicant's Registered Agent within Pennsylvania.

InCorp Services Inc. 7208 Red Top Road Hummelstown, PA 17036

- c. **REGULATORY CONTACT:** Provide the name, title, address, telephone number, fax number, and e-mail address of the person to whom questions about this Application should be addressed.

Hamed Babai, 350 N LaSalle Street 9th Floor Chicago IL 60654
CEO
Phone 855-475-4675 Fax:855-569-4327 Email: hbabai@powerkiosk.com

- d. **ATTORNEY:** Provide the name, address, telephone number, fax number, and e-mail address of the Applicant's attorney. If the Applicant is not using an attorney, explicitly state so.

Applicant is not using an attorney

RECEIVED

APR 16 2018

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

404821

- e. **CONTACTS FOR CONSUMER SERVICE AND COMPLAINTS: (Required of ALL Applicants)** Provide the name, title, address, telephone number, FAX number, and e-mail **OF THE PERSON AND AN ALTERNATE PERSON (2 REQUIRED)** responsible for addressing customer complaints. These persons will ordinarily be the initial point(s) of contact for resolving complaints filed with the Applicant, the Electric Distribution Company, the Pennsylvania Public Utility Commission, or other agencies. The main contact's information will be listed on the Commission website list of licensed EGSs.

Nasim Carlsen, Client Partner Associate
350 N LaSalle Street 9th Floor Chicago IL 60654

855-475-4675
info@powerkiosk.com

Hamed Babai CEO

350 N LaSalle Street 9th Floor Chicago IL 60654

855-475-4675

hbabai@powerkiosk.com


2. BUSINESS ENTITY FILINGS AND REGISTRATION

- a. **FICTITIOUS NAME:** (Select appropriate statement and provide supporting documentation as listed.)

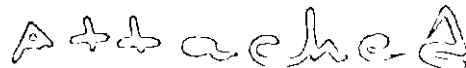
- b. **BUSINESS ENTITY AND DEPARTMENT OF STATE FILINGS:**

(Select appropriate statement and provide supporting documentation. As well, understand that Domestic means being formed within Pennsylvania and foreign means being formed outside Pennsylvania.)

The Applicant is a: foreign limited liability company (15 Pa. C.S. §8981)

- Certificate of Good Standing Attached (Less than 90 days old) 
- Provide the state in which the business is incorporated/organized/formed and provide a copy of the Applicant's charter documentation.

IL



- Give name and address of officers.

Hamed Babai CEO
350 N LaSalle Street 9th Floor Chicago IL 60654

3. AFFILIATES AND PREDECESSORS

(both in state and out of state)

- a. **AFFILIATES:** Give name and address of any affiliate(s) currently doing business and state whether the affiliate(s) are jurisdictional public utilities. If the Applicant does not have any affiliates doing business, explicitly state so. Also, state whether the applicant has any affiliates that are currently applying to do business in Pennsylvania.

Applicant has no affiliate that does business or applying for license in Pennsylvania

- b. **PREDECESSORS:** Identify the predecessor(s) of the Applicant and provide the name(s) under which the Applicant has operated within the preceding five (5) years, including address, web address, and telephone number, if applicable. If the Applicant does not have any predecessors that have done business, explicitly state so.

Applicant has no predecessors that has operated within the preceding five (5) years

4. OPERATIONS

- a. **APPLICANT'S PRESENT OPERATIONS:** (select and complete the appropriate statement)

The Applicant is not presently doing business in Pennsylvania.

- b. **APPLICANT'S PROPOSED OPERATIONS:** The Applicant proposes to operate as a (may check multiple):

- Aggregator engaged in the business of supplying electricity
- Broker/Marketer engaged in the business of supplying electricity services
 - Check here to verify that your organization will not be taking title to the electricity nor will you be making payments for customers.

updated

- c. **PROPOSED SERVICES:** Describe in detail the electric services or the electric generation services which the Applicant proposes to offer.

Consulting and brokerage for energy customers across Pennsylvania through a proprietary software called Power Kiosk.

- d. **PROPOSED SERVICE AREA:** Check the box of each Electric Distribution Company for which the Applicant proposes to provide service.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Citizens' Electric | <input checked="" type="checkbox"/> Pike |
| <input checked="" type="checkbox"/> Duquesne Light | <input checked="" type="checkbox"/> PPL |
| <input checked="" type="checkbox"/> Met-Ed | <input checked="" type="checkbox"/> UGI Utilities |
| <input checked="" type="checkbox"/> PECO | <input checked="" type="checkbox"/> Wellsboro |

7.

b. FINANCIAL RECORDS, STATEMENTS, AND RATINGS: Applicant must provide sufficient information to demonstrate financial fitness commensurate with the service proposed to be provided. Examples of such information which may be submitted include the following:

- Actual (or proposed) organizational structure including parent, affiliated or subsidiary companies.
- Published Applicant or parent company financial and credit information (i.e. 10Q or 10K). (SEC/EDGAR web addresses are sufficient)
- Applicant's accounting statements, including balance sheet and income statements for the past two years.
- Evidence of Applicant's credit rating. Applicant may provide a copy of its Dun and Bradstreet Credit Report and Robert Morris and Associates financial form, evidence of Moody's, S&P, or Fitch ratings, and/or other independent financial service reports.
- A description of the types and amounts of insurance carried by Applicant which are specifically intended to provide for or support its financial fitness to perform its obligations as a licensee.
- Audited financial statements exhibiting accounts over a minimum two year period.
- Bank account statement, tax returns from the previous two years, or any other information that demonstrates Applicant's financial fitness.

3 Months of Bank Statements are attached.

c. SUPPLIER FUNDING METHOD: If Applicant is operating as anything other than **Broker/Marketer only**, explain how Applicant will fund its operations. Provide all credit agreements, lines of credit, etc., and elaborate on how much is available on each item.

Not Applicable due to applicant being a broker

d. BROKER PAYMENT STRUCTURE: If applicant is a broker/marketer, explain how your organization will be collecting your fees.

We get paid by the suppliers whose products we will be selling.

7.

e. ACCOUNTING RECORDS CUSTODIAN: Provide the name, title, address, telephone number, FAX number, and e-mail address of Applicant's custodian for its accounting records.

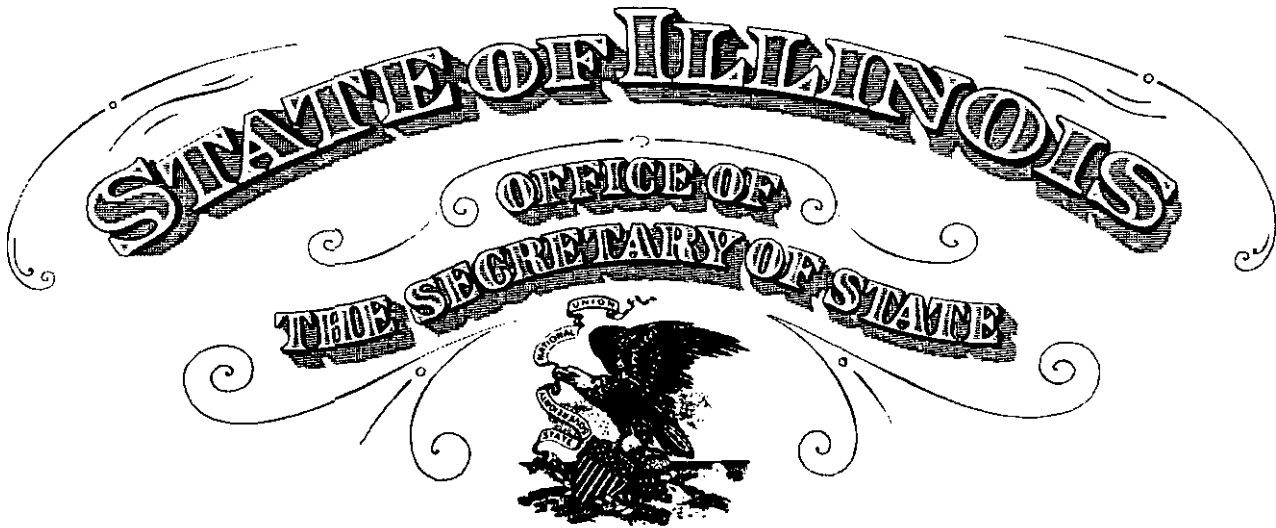
Hamed Babai CEO
 350 N LaSalle Street 9th Floor Chicago IL 60654
 855-475-4675
 Fax 855-569-4327
 hbabai@powerkiosk.com

f. TAXATION: Complete the TAX CERTIFICATION STATEMENT attached as Appendix I to this application.

All sections of the Tax Certification Statement must be completed. Absence (submitting N/A) of any of the TAX identifications numbers (items 7A through 7C) shall be accompanied by supporting documentation or an explanation validating the absence of such information.

2018
File Number

0446618-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

NRG KIOSK LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 26, 2013, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 23RD day of FEBRUARY A.D. 2018 .

Jesse White

SECRETARY OF STATE

2 - b

Form **LLC-5.5**

**Illinois
Limited Liability Company Act
Articles of Organization**

FILE # 04466187

Secretary of State Jesse White
Department of Business Services
Limited Liability Division
www.cyberdriveillinois.com

Filing Fee: \$500
Expedited Fee: \$100
Approved By: JMD1

FILED
JUL 26 2013
Jesse White
Secretary of State

1. Limited Liability Company Name: NRG KIOSK LLC

2. Address of Principal Place of Business where records of the company will be kept:
215 W. WASHINGTON AVE; #3102
CHICAGO, IL 60606

3. Articles of Organization effective on the filing date.

4. Registered Agent's Name and Registered Office Address:

JONATHAN D OPPENHEIMER
4054 N. LINCOLN AVE; 2ND FLOOR
CHICAGO, IL 60618

5. Purpose for which the Limited Liability Company is organized:
"The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act."

6. The LLC is to have perpetual existence.

7. The Limited Liability Company has management vested in the member(s).

Hamed Alibabai
3102 W WASHINGTON AVE #3102
CHICAGO, IL 60606

8. Name and Address of Organizer

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated: JULY 26, 2013

JONATHAN D OPPENHEIMER
4054 N. LINCOLN AVE; 2ND FLOOR
CHICAGO, IL 60618



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
400 NORTH STREET, HARRISBURG, PA 17120

IN REPLY PLEASE
REFER TO OUR FILE

April 13, 2018

Docket No. A-2018-3000981
Utility Code: 1120843

CERTIFIED

HAMED BABAI
POWER KIOSK LLC
350 LASALLE ST 9TH FL
CHICAGO IL 60654

RE: Electric Generation Supplier License Application

Dear Mr. Babai:

On April 5, 2018, Power Kiosk LLC's application for an Electric Generation Supplier license was accepted for filing and docketed with the Public Utility Commission. The application was incomplete. In order for us to complete our analysis of your application, the Energy Industry Group requires answers to the attached question(s).

Please be advised that you are directed to forward the requested information to the Commission within **30** days of receipt of this letter. Failure to respond may result in the application being denied. As well, if Power Kiosk LLC has decided to withdraw its application, please reply notifying the Commission of such a decision.

Please forward the information to the Secretary of the Commission at the address listed below. When submitting documents, all documents requiring notary stamps must have original signatures. Please note that some responses may be e-filed to your case, <http://www.puc.pa.gov/efiling/default.aspx>. A list of document types allowed to be e-filed can be found at <http://www.puc.pa.gov/efiling/DocTypes.aspx>.

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
400 North Street
Harrisburg, PA 17120

Your answers should be verified per 52 Pa Code § 1.36. Accordingly, you must provide the following statement with your responses:

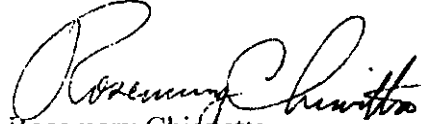
I, Hamed Babai hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief, and that I expect to be able to prove the same at a hearing held in this matter. I understand that the

statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

The blank should be filled in with the name of the appropriate company representative, and the signature of that representative should follow the statement.

Please direct any questions to Stephen Jakab, Bureau of Technical Utility Services, at sjakab@pa.gov (preferred) or (717) 783-6174.

Sincerely,

A handwritten signature in cursive script, appearing to read "Rosemary Chiavetta".

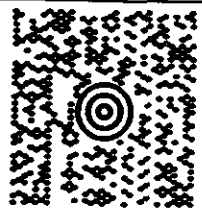
Rosemary Chiavetta
Secretary

Enclosure

CACH 6059 D

Bin#: 1273
Bag Seq#: 4
Pieces: 16

Sort to:
AMAZON EARLY LE
SUNRISE
AMAZON IL 60980



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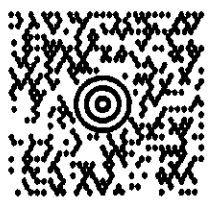
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FROM: BABAI
412-5780
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929 E WACKER DR
CHICAGO IL 60601-5206

1 LBS 1 OF 1
SHP WT: 1 LBS
DATE: 16 APR 2010

SHIP COMMON WEALTH OF PENNSYLVANIA
TO: STE 800
400 NORTH ST

HARRISBURG PA 17120-0200

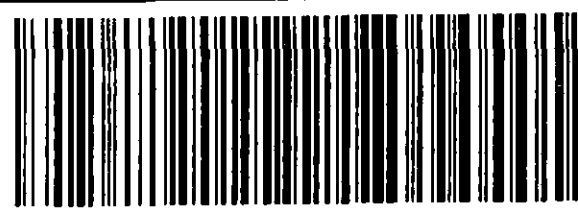


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COMMON WEALTH OF PENNSYLVANIA
400 NORTH ST