CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2018-391878 Superion, LLC Lake Mary, FL United States Date Filed: 08/14/2018 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Collin County Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract. 20051053 Software Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary 5 Check only if there is NO Interested Party. X UNSWORN DECLARATION 3/23/1975 Lisa Neumann My name is ____, and my date of birth is _ 1000 Business Center Dr. 34748 USA Lake Mary My address is _ (street) (city) (state) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. 2018 Seminole FL 14th August Executed in _ County, State of ___ (year) DocuSigned by:

isa Mumann

.81171 தெருது புகூறி authorized agent of contracting business entity (Declarant)