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 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: 2020-652155 MCCi. LLC TALLAHASSEE, FL United States Date Filed: 08/03/2020 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 3 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. 2013-019 Software Maintenance, Records Management System Nature of interest 4 (check applicable) Name of Interested Party City, State, Country (place of business) Controlling Intermediary Χ CPC MCCi Holdings, LLC El Segundo, CA United States 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** James Dandy and my date of birth is My name is My address is (state) (zip code) (country) (street) (city) I declare under penalty of perjury that the foregoing is true and correct. on the ____day of ____ Florida 20 Leon County, State of Executed in (month) (year) E-SIGNED by James Dandy on 2020-08-03 15:04:52 GMT

Signature of authorized agent of contracting business entity (Declarant)