CERTIFICATE OF INTERESTED PARTIES

FORM 1295

⊨					1 of 1		
	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.			OFFICE USE ONLY			
1	Name of business entity filing form, and the city, state and country of the business entity's place			CERTIFICATION OF FILING Certificate Number:			
	of business. Collision Repair Unit 3, LLC dba Maaco				2021-824253		
	ylie, TX United States			D			
2	Name of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 11/16/2021			
	being filed. Collin County	icu.					
L			Date Acknowledged:				
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.						
	2018-263						
L	Collision Repair & Paint						
4	Name of Interested Party City, State, Country (place of business			Nature of interest			
	Name of interested Party	City, State, Country (place of busine	ry (place of business)		pplicable)		
Collision Repair Unit 3, LLC		Wylie, TX United States		Controlling	Intermediary		
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5 Check only if there is NO Interested Party.							
6	JNSWORN DECLARATION						
	My name is Helmoth Mayer Ji.						
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	I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inCounty, State of, on theday ofNov, 20Z1						
		1 8					
	Signature of authorized agent of contracting business entity (Declarant)						