## 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 CERTIFICATION OF FILING		
Name of business entity filing form, and the city, state and country of the business entity's place of business.  sams lawn riders II LLC sherman, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  collin county-		Certificate Number: 2024-1125870  Date Filed: 02/20/2024  Date Acknowledged:		
Name of Interested Party	City, State, Country (place of business)		Nature of interest (check applicable)  Controlling Intermediany	
rgis, robert	Sherman, TX United States		X	
Check only if there is NO Interested Party.				
UNSWORN DECLARATION  My name is Robert Hargis	and my date of birth is			
My address is (street)	(city)	(state)	(zip code)	(country)
I declare under penalty of perjury that the foregoing is true a  Executed in	and correct. County, State of Texas, o	n the 20	2 day of Fel (mo	onth) (yes
	21 La 44	7		
	Signature of authorized agent (Declarant	of contra		ion V3.5.1.900