

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

Certificate Number:
2025-1357312

Date Filed:
09/02/2025

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

MCCI, LLC
Tallahassee, FL United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

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
2013-019 Services, Maintenance, Records Management Systems

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	CPC MCCi Holding, LLC,	Tallahassee, FL United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is Emery Jones, and my date of birth [REDACTED]

My address is [REDACTED]
(city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Santa Cruz County, State of Californina, on the 2 day of September, 20 25.
(month) (year)

E-SIGNED by Emery Jones
mcci - justice
on 2025-09-02 14:02:55 GMT

Signature of authorized agent of contracting business entity
(Declarant)