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		
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. ASSURED MECHANICAL SOLUTIONS L Desoto, TX United States			Certificate Number: 2025-1351339 Date Filed: 08/18/2025 Date Acknowledged:		
2	ame of governmental entity or state agency that is a party to the contract for which the form is eing filed. collin County					
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided 2021-244 HVAC Services		the cont	tract, and prov	vide a	
4	Name of Interested Party	City, State, Country (place of busin	Nature of interest (check applicable) Controlling Intermediary			
R	oberts, Sonya	Lancaster, TX United States		Х		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION Sonva Roberts					
	My name is Sonya Roberts	birth is				
	My address is	(city) (s	tate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct Executed in	ct. y, State of, on the	18 _{da}	, Augus	st ₂₀ 25	
				(month)	, (year)	
		Signature/of/author/zed agent of cor (Declarant)	itracting b	usiness entity		