CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| | | | | | 1011 | | | | |
|--|---|------|--------------------|--|--------------------|--|--------------|--|--|
| | 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 | lame of business entity filing form, and the city, state and country of the business entity's place f business. | | | Certificate Number: | | | | | |
| | un Auto Tire & Service, Inc. | | | 2025-1365444 | | | | | |
| | Mesa, AZ United States | | Date Filed: | | | | | | |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is | | | 09/18/2025 | | | | | |
| | being filed. City of Round Rock Texas | | | | | | | | |
| | | | | Date Acknowledged: | | | | | |
| 3 | Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide description of the services, goods, or other property to be provided under the contract. | | | | | | | | |
| | 00000 | | | | | | | | |
| | Auto Repair & Service | | | | | | | | |
| 4 | Name of Interested Party City, State, Country (place of busin | | Nature of interest | | | | | | |
| | | | | NAME AND ADDRESS OF TAXABLE PARTY. | (check applicable) | | | | |
| _ | | | | Controlling | Intermediary | | | | |
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| | | | | | | | | | |
| 5 | Check only if there is NO Interested Party. | | | | | | | | |
| 6 | UNSWORN DECLARATION | | | | | | | | |
| | My name is Wayne Holder , and my date of | | | | | | | | |
| | | | | 85210 | V5A | | | | |
| | (city) | (sta | | (zip code) | (country) | | | | |
| I declare under penalty of perjury that the foregoing is true and correct. | | | | | | | | | |
| Executed in MARICOPA County, State of ARIZONA, on the 18th day of September, 2025. | | | | | | | | | |
| | | | | | | | Warms Holder | | |
| | Signature of authorized a | • | acting b | usiness entity | | | | | |
| | (Declarant) | | | | | | | | |

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| | | | | | 1011 | | | | |
|---|--|----------------------------------|---------------------------|---|--------------|--|--|--|--|
| | omplete Nos. 1 - 4 and 6 if there are interested parties. omplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. | | CE | OFFICE USE ONLY CERTIFICATION OF FILING | | | | | |
| 1 | lame of business entity filing form, and the city, state and country of the business entity's place | | | Certificate Number: | | | | | |
| | of business. | | 202 | 5-1365444 | | | | | |
| | Sun Auto Tire & Service, Inc. | | Doto | . Filad. | | | | | |
| 2 | Mesa, AZ United States Name of governmental entity or state agency that is a party to the | | Date Filed: 09/18/2025 | | | | | | |
| _ | being filed. | 00/2 | | | | | | | |
| | City of Round Rock Texas | | | e Acknowledged: 18/2025 | | | | | |
| 3 | ovide the identification number used by the governmental entity or state agency to track or identify the contract, and pro | | | | | | | | |
| 3 | description of the services, goods, or other property to be provid | | ary are c | contract, and pro- | riue a | | | | |
| | 00000 | | | | | | | | |
| | Auto Repair & Service | | | | | | | | |
| 4 | | | | Nature of interest | | | | | |
| - | Name of Interested Party City, State, Country (place of busin | | siness) | (check applicable) | | | | | |
| | | | | Controlling | Intermediary | | | | |
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| 5 | Check only if there is NO Interested Party. | | | | | | | | |
| 6 | UNSWORN DECLARATION | | | | | | | | |
| | My name is | name is, and my date of birth is | | | | | | | |
| | Mu address is | | | | | | | | |
| | My address is | (city) | (state) | (zip code) | (country) | | | | |
| | I declare under penalty of perjury that the foregoing is true and correct | it. | | | | | | | |
| | Executed inCounty | /, State of, on t | ne | _day of | , 20 | | | | |
| | | . | | (month) | (year) | | | | |
| | | | | | | | | | |
| | Signature of authorized agent of contracting business entity (Declarant) | | | | | | | | |