CERTIFICATE OF INTERESTED PARTIES

FORM 1295

L					1 of 1			
F	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE	a standards, and shared and shares and			
L	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			RTIFICATION	OF FILING			
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's place		ficate Number: -1187566				
	Auto Dent Quality			Liled				
Ļ	Pflugerville, TX United States			Date Filed: 07/15/2024				
2	Name of governmental entity or state agency that is a party to the being filed.							
	City of Round Rock, Texas			Date Acknowledged:				
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide	ity or state agency to track or identify led under the contract.	the co	ontract, and pro	vide a			
	RFP 24-017							
L	Repair of fleet vehicles from hail damage and collision				Electron			
4	Name of Interested Party City, State, Country (place of bus		(229	Nature of (check ap				
				Controlling	Intermediary			
Γ								
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F								
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is Darshan Shah	, and my date of t	birth is					
	My address is 6600 Ed Bluestein Blud, Apt 1014, Austin, TX 78723, USA.							
	(street) (city) (state) (zip code) (country)							
	I declare under penalty of perjury that the foregoing is true and correc	7L						
	Executed in Travis County, State of Texas, on the 15 day of July, 2024.							
	Del							
	Signature of authorized agent of contracting business entity							
	(Declarant)							

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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	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.			Certificate Number: 2024-1187566					
	Auto Dent Quality								
	Pflugerville, TX United States		Date	Date Filed:					
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	07/1	07/15/2024					
	being filed.								
	City of Round Rock, Texas		Date Acknowledged:						
		07/1	07/16/2024						
3	description of the services, goods, or other property to be provide	the identification number used by the governmental entity or state agency to track or identify the contract, and provide a tion of the services, goods, or other property to be provided under the contract.							
	RFP 24-017								
	Repair of fleet vehicles from hail damage and collision								
				Nature of	interest				
4	Name of Interested Party City, State, Country (place of bus		siness)		heck applicable)				
				Controlling	Intermediary				
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-									
-									
	5 Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	Mu nome in	•	of high 1	-					
	My name is	, and my date	ot birth i	S	•				
	My address is(street));	,	(=in!-)	··				
	(street)	(city)	(state)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCount	v, State of . on t	he	day of	, 20 .				
	Oun	,	-	(month)	, 20 (year)				
	Signature of authorized agent of contracting business entity (Declarant)								
	(Deciarant)								