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:		
	ne PlayWell Group, Inc.			2020-698232		
	oerne, TX United States			Date Filed:		
2	ame of governmental entity or state agency that is a party to the contract for which the form is eing filed.		12/11/2020			
	City of Round Rock			Date Acknowledged:		
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.					
	Old Settlers Park					
	Custom Steel Shelter					
Nature of i					f interest	
4	Name of Interested Party City	City, State, Country (place of busine			pplicable)	
				Controlling	Intermediary	
				¥		
		ji.				
5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION					
	My name is					
	My address is 203A State Highway 46E, Boerne, TX, 78006, US. (state) (zip code) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in Kendall County, State of Texas, on the 11 day of Doc., 20 20.					
	MARIA POWELL Notary Public, State of Texas					
	Comm. Expires 06-28-2022 Notary ID 4053455 Signature of authorized agent of contracting business entity (Declarant)					
	(Decidiant)					