

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:
2022-937479

Date Filed:
09/23/2022

Date Acknowledged:
09/26/2022

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
BlueWave Express Car Wash
San Rafael, CA United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo 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.
22-0544-MGN
Express Car Wash Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	BlueWave Express, LLC	San Rafael, CA United States	X	
	BWE II, LLC	San Rafael, CA United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the ____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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22-0544-MGN
Express Car Wash Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	BlueWave Express, LLC	San Rafael, CA United States	X	
	BWE II, LLC	San Rafael, CA United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Gin Louie, and my date of birth is _____.

My address is 2175 Francisco Blvd East, Suite G, San Rafael, CA, 94901, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Marin County, State of CA, on the 23 day of September, 2022.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)