

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:
2025-1332008

Date Filed:
07/02/2025

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

CG5 Architect, LLC
Mission, TX 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.

C-25-0033-03-04
Amendment No. 1 to C-25-0033-03-04 / Precinct No. 3 Wellness Center

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Garcia, Olga	Mission, TX United States	X	
	Garcia III, Jose Carlos	Mission, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is JOSE CARLOS GARCIA III, and my date of birth is [REDACTED]

My address is 1314 E. 22ND ST (street), MISSION (city), TX (state), 78572 (zip code), USA (country).

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

Executed in HIDALGO County, State of TEXAS, on the 2 day of July, 2025.
(month) (year)


Signature of authorized agent of contracting business entity (Declarant)

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.
CG5 Architect, LLC
Mission, TX United States

Certificate Number:
2025-1332008

Date Filed:
07/02/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
HIDALGO COUNTY

Date Acknowledged:
07/02/2025

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.
C-25-0033-03-04
Amendment No. 1 to C-25-0033-03-04 / Precinct No. 3 Wellness Center

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Garcia, Olga	Mission, TX United States	X	
	Garcia III, Jose Carlos	Mission, TX 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)