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	Name of business entity filing form, and the city, state and country of the business entity's place			Certificate Number:		
	f business.		202	2025-1280455		
	CentralSquare Technologies LLC Lake Mary, FL United States			Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is			03/12/2025		
_	being filed.					
	Williamson County Sheriff			Date Acknowledged: 03/13/2025		
_	Duravida the identification number used by the governmental out	itu ay atata ayanay ta tuask ay ida			ido o	
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.					
	2025169					
	Connecting Brazos to RMS for Constables 4					
4				Nature of interest		
_	Name of Interested Party City, State, Country (place of busin		usiness)	(check ap		
				Controlling	Intermediary	
Kotzabasakis, Manolis		Lake Mary, FL United States		X		
Grilliot, Sara		Lake Mary, FL United States		X		
Medintz, Barry		Lake Mary, FL United States	;	X		
				<u>'</u>		
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)	(-1-1-)	,·		
	(street)	(City)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	ct.				
	Executed inCount	y, State of, on	the	_day of	, 20	
				(month)	(year)	
	Signature of authorized agent of contracting business entity (Declarant)					

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2025-1280455 CentralSquare Technologies LLC Lake Mary, FL United States Date Filed: 03/12/2025 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Williamson County Sheriff 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. 2025169 Connecting Brazos to RMS for Constables 4 Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Lake Mary, FL United States Χ Kotzabasakis, Manolis Grilliot, Sara Lake Mary, FL United States Χ Χ Lake Mary, FL United States Medintz, Barry 5 Check only if there is NO Interested Party. UNSWORN DECLARATION My name is Barry Medintz 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 _Seminole County, State of Florida , on the 12th day of March DocuSigned by:

Signature of authorized agent of contracting business entity (Declarant)