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	ame of business entity filing form, and the city, state and country of the business entity's place			Certificate Number:		
	of business. Superion, LLC, a CentralSquare Technologies Company			2025-1361623		
	Lake Mary, FL United States	reciniologies company		te Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is			09/10/2025		
	being filed.					
	Williamson County Sheriff			te Acknowledged: 11/2025		
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.					
	2026-009					
	ONESolution CAD/MCT/MFR annual support					
_				Nature of interest		
4	Name of Interested Party City, State, Country (place of busi		f business)) (check ap	plicable)	
				Controlling	Intermediary	
Kotzabasakis, Manolis		Lake Mary, FL United States		Х		
Grilliot, Sara		Lake Mary, FL United States		Х		
Medintz, Barry		Lake Mary, FL United Stat	tes	X		
_	Check and if there is NO Intercepted Ports					
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	ly name is, and my date of birth is					
	My address is					
		(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and corre	ct.				
	Executed inCount	ty, State of,	on the	day of		
				(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. 2025-1361623 Superion, LLC, a CentralSquare Technologies Company Lake Mary, FL United States Date Filed: 09/10/2025 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. 2026-009 ONESolution CAD/MCT/MFR annual support Nature of interest 4 City, State, Country (place of business) Name of Interested Party (check applicable) Controlling Intermediary Lake Mary, FL United States X Kotzabasakis, Manolis Lake Mary, FL United States Χ Grilliot, Sara Lake Mary, FL United States X Medintz, Barry 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is _, and my date of birth is 🗀 USA My address i. (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 10th day of September, 20 25 (year) DocuSigned by

Signature of authorized agent of contracting business entity (Declarant)