

# 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:  
2022-865699

Date Filed:  
03/28/2022

Date Acknowledged:

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

Dippin' Dots, LLC  
Paducah, KY United States

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

NRH2O Family Waterpark

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.

22-010  
Beaded frozen ice cream, yogurt, sherbet and flavored ice

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest<br>(check applicable) |              |
|---|--------------------------|------------------------------------------|------------------------------------------|--------------|
|   |                          |                                          | Controlling                              | Intermediary |
|   | Dippin' Dots LLC         | Paducah, KY United States                |                                          | X            |
|   |                          |                                          |                                          |              |
|   |                          |                                          |                                          |              |
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|   |                          |                                          |                                          |              |
|   |                          |                                          |                                          |              |

5 Check only if there is NO Interested Party. ☐

### 6 UNSWORN DECLARATION

My name is STEVE HEISNER, and my date of birth is 8/28/1954.

My address is 5101 CHARTER OAK DR, PADUCAH, KY, 42001, USA.  
(street) (city) (state) (zip code) (country)

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

Executed in MCCracken County, State of KY, on the 28 day of MARCH, 20 22.  
(month) (year)



Signature of authorized agent of contracting business entity  
(Declarant)