CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

				* 100	1011	
	omplete Nos. 1 - 4 and 6 if there are interested parties. omplete 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 f business. ICCi, LLC		Certificate Number: 2021-716245			
	Tallahassee, 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		02/11/2021			
	being filed. The City of North Richland Hills		Date Acknowledged:			
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. 2021-02-22-LF Laserfiche Content Management Services					
_			Nature of interest			
4	Name of Interested Party City, State, Country (place of business)		ess)	ss) (check applicable)		
			(Controlling	Intermediary	
C	PC MCCi Holdings, LLC El So	El Segundo, CA United States		X		
			· ·			
5 Check only if there is NO Interested Party.						
6	SWORN DECLARATION					
	My name is, and my date of birth is					
	My address is 3717 Apalachee Parkway, Suite 201 , Tallahassee , FL , 32311 , USA . (street) (city) (state) (zip code) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in Leon County, State of Florida , on the 11 day of February , 20 21 (month) (year)					
	Signature of authorized agent of contracting business entity (Declarant)					
	(Declarant)					