| 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<br>CERTIFICATION OF FILING |  |                |  |  |
| 1   | Name of business entity filing form, and the city, state and country of the business entity's place of business.  |  | Certificate Number:<br>2017-156691         |  |                |  |  |
|   | Besitos and Joy   |  |  |  |                |  |  |
|   | San Antonio, TX United States   |  | Date Filed:                                |  |                |  |  |
| 2   |   |  | 01/20/2017                                 |  |                |  |  |
|   | being filed. City of San Antonio  |  |  | Date Acknowledged:                       |                |  |  |
|   | City of San Antonio   |  | <b></b>                                    |  |                |  |  |
| 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. |  |  |  |                |  |  |
|   | 40002144  Specialty boutique featuring jewelry, clothing, and handcrafted decor primarily from Mexico, Central and South America.   |  |  |  |                |  |  |
| 4   |   |  | 1.12                                       | Nature of interest<br>(check applicable) |                |  |  |
|   | Name of Interested Party  | City, State, Country (place of business    |  | (check ap                                | intermediary   |  |  |
| В   | esitos and Joy  | San Antonio, TX United States              | 19.  | X  | intermedialy   |  |  |
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| 5 Check only if there is NO Interested Party.   |   |  |  |  |                |  |  |
| 6   | AFFIDAVIT I swear, or   | affirm, under penalty of perjury, that the | above                                      | e disclosure is tru                      | e and correct. |  |  |
|   | NICK MARTIN My Commission Expires July 24, 2017  Signature of authorized agent of columnating business entity   |  |  |  |                |  |  |
|   | Sworm to and subscribed before me, by the said Toyce Director Velezovez, this the 20 th day of Toyce 20 17, to certify which, witness my hand and seal of office.   |  |  |  |                |  |  |
| Motified Nick Martin Dotary  Bighature of officer administering oath Printed name of officer administering oath Title of officer administering oath |   |  |  |  |                |  |  |
|   |   |  |  |  | 0.00           |  |  |