

# 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

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
Healix Infusion Therapy, Inc.  
Sugar Land, TX United States

Certificate Number:  
2016-5633

Date Filed:  
01/25/2016

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
FORT BEND COUNTY DRAINAGE DISTRICT

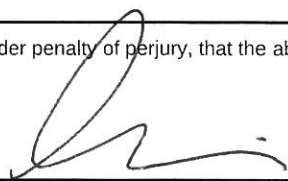
Date Acknowledged:

**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 goods or services to be provided under the contract.**  
FBCDD ABATE  
tax abatement

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
1330 Industrial Blvd, LLC	Sugar Land, TX United States		X

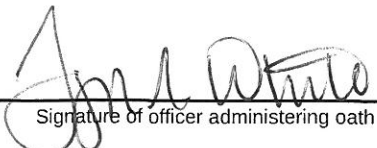
**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

  
\_\_\_\_\_  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Atty, this the 26<sup>th</sup> day of July, 2016, to certify which, witness my hand and seal of office.

 Taylor N White  
Signature of officer administering oath Printed name of officer administering oath



# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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## 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 of business.**  
Healix Infusion Therapy, Inc.  
Sugar Land, TX United States

Certificate Number:  
2016-5634

Date Filed:  
01/25/2016

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

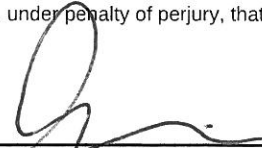
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tax abatement

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		Controlling	Intermediary
1330 Industrial Blvd, LLC	Sugar Land, TX United States		X

**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

  
 \_\_\_\_\_  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Allyson, this the 26<sup>th</sup> day of March, 2016, to certify which, witness my hand and seal of office.

Taylor N. White  
Signature of officer administering oath

Taylor N. White  
Printed name of officer administering oath

