CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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

Certificate Number:

Date Filed:

Date Acknowledged:

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

AEROCLOUD SYSTEMS INC
WILMINGTON, DE., UNITED STATES

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

CITY OF MCKINNEY

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.

26-35 RFP
AIRPORT COMMON USE — AMENDMENT FOR ADDITIONAL FIDS BOXES AND LICENCES

4 Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary
AEROCLOUD SYSTEMS LIMITED	STOCKPORT, UNITED KINGDOM	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.

PAUL KELLY, FINANCE DIRECTOR
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

07/13/2026

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

ADD ADDITIONAL PAGES AS NECESSARY