



POINT OF SALE SYSTEM SERVICE AGREEMENT  
EXHIBIT A

|                                                                                           |                                             |                 |                    |
|-------------------------------------------------------------------------------------------|---------------------------------------------|-----------------|--------------------|
| <input type="checkbox"/> New Account <input checked="" type="checkbox"/> Existing Account | Existing MID: 0021955657                    | Date: 1/22/2024 | Office Code: SP226 |
| Merchant DBA Name ("Merchant"): The Refined Pantry LLC                                    |                                             |                 |                    |
| Merchant Legal Name: The Refined Pantry LLC                                               |                                             |                 |                    |
| Merchant Address: 3366 Verot School Rd Unit 101                                           |                                             |                 |                    |
| City: Lafayette                                                                           | State: LA                                   | ZIP: 70508      |                    |
| Merchant Phone: 337-451-4006                                                              | Email Address: Therefinedorpantry@gmail.com |                 |                    |

ENROLLMENT OPTIONS

For the Service Fees set forth below and in accordance with the terms and conditions set forth in the Service Agreement the Merchant shall receive the following service:

Base Package

Each POS base package includes the following items. Items not included may still be available for purchase based on the software selected.

- 1 POS System
- 1 Cash Drawer

- 1 Receipt Printer
- 1 EMV PIN Pad

- 1 Keyboard\*
- 1 Mouse\*

- 10 Server Cards

\*not included with SkyTab POS

Software

|                                                                         |                                                                           |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------|
| <input type="checkbox"/> SkyTab POS: _____ x \$29.99/month              | <input type="checkbox"/> Restaurant Manager: _____ x \$49.99/month        |
| <input type="checkbox"/> Harbortouch Hospitality: _____ x \$49.99/month | <input type="checkbox"/> POSitouch: _____ x \$49.99/month                 |
| <input type="checkbox"/> Harbortouch Retail: _____ x \$49.99/month      | <input type="checkbox"/> Future POS: _____ x \$49.99/month                |
| <input type="checkbox"/> Harbortouch Checkout: _____ x \$49.99/month    | <input type="checkbox"/> Focus POS: _____ x \$49.99/month                 |
| <input type="checkbox"/> Harbortouch Salon & Spa: _____ x \$49.99/month | <input type="checkbox"/> Focus POS (software only): _____ x \$19.99/month |

Total Monthly Service Fee: \$ \_\_\_\_\_ /month plus local, state, and federal taxes

☐ Check here if you DO NOT need a cash drawer with some of the systems ordered.  
Number of cash drawers needed: \_\_\_\_\_

How many POS stations will be accepting payment? \_\_\_\_\_ Connection Type: ☐ USB    ☐ Ethernet

☐ Server/Employee Cards  
First 10 cards are included free in base package  
☐ Additional bundles of 50 - \$49.00 per 50 cards  
Number of additional bundles: \_\_\_\_\_

Optional Add-Ons ("Add-Ons") For an additional monthly per-item service charge Merchant shall be entitled to service for the Add-ons as set forth in the Agreement.

|                                                                          |                                                                            |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> SkyTab Mobile: _____ x \$15.00/month            | <input type="checkbox"/> Remote Printer - Thermal: _____ x \$9.99/month    |
| <input type="checkbox"/> SkyTab Glass: _____ x \$29.99/month             | <input type="checkbox"/> Remote Printer - Dot Matrix: _____ x \$9.99/month |
| <input type="checkbox"/> SkyTab KDS: _____ x \$29.99/month               | <input type="checkbox"/> Kitchen Video System: _____ x \$39.99/month       |
| SkyTab Customer-facing Display: <b>X</b> _____ x \$29.99/month           | Digital Scale (SkyTab/Hosp/Retail/Checkout): _____ x \$39.99/month         |
| EMV/NFC PIN Pad (SkyTab only): _____ x \$9.99/month                      | Caller ID - 2 Line: _____ x \$9.99/month                                   |
| Tableside (HT Hospitality/Focus/Future/POSi/RM): _____ x \$49.99/month   | Caller ID - 4 Line: _____ x \$19.99/month                                  |
| <input type="checkbox"/> POS Server (Future/POSi): _____ x \$39.99/month | 2D Barcode Scanner: _____ x \$19.99/month                                  |

Optional Accessory Purchases

These Items are Purchased by Merchant before or after initial sale and are NOT part of the Service Agreement. All products received "as is, whereis".

|                                                                                   |                                                                        |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> Integrated Customer Display (Onyx only): _____ x \$69.00 | <input type="checkbox"/> Additional Cash Drawer: _____ x \$129.00      |
| <input type="checkbox"/> Additional Cash Till: _____ x \$25.00                    | <input type="checkbox"/> Split Cable for Cash Drawers: _____ x \$25.00 |

SHIPPING METHOD

☒ Ground (N/A for AK & HI)  
☐ 2nd Day  
☐ Next Day Air  
See Service Agreement terms for details.

vaulted Security

Name: \_\_\_\_\_  
Address: 954 Highway 741  
City: Arnaudville State: LA ZIP: 70512  
Telephone Number: \_\_\_\_\_

PROGRAMMING/INSTALLATION METHOD (NEW SKYTAB POS ORDERS ONLY)

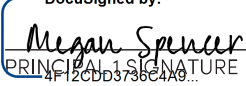
|                                                    |                                                                                                                        |                                                                |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| <input checked="" type="checkbox"/> No Programming | <input type="checkbox"/> Fast Track<br><input type="checkbox"/> S4 Install<br><input type="checkbox"/> Partner Install | <input type="checkbox"/> Full Service Programming/Installation |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|

|                                            |  |                                              |                     |                                        |              |
|--------------------------------------------|--|----------------------------------------------|---------------------|----------------------------------------|--------------|
| <b>OWNERS OR OFFICERS</b>                  |  |                                              |                     |                                        |              |
| Principal #1<br><b>Megan Spencer</b>       |  | Social Security Number<br><b>433-77-1299</b> |                     | Principal #2<br>Social Security Number |              |
| Residence Address<br><b>34 Oakthorn Ct</b> |  |                                              |                     | Residence Address                      |              |
| City<br><b>Youngsville</b>                 |  | State<br><b>LA</b>                           | ZIP<br><b>70592</b> | City                                   | State<br>ZIP |

**Personal Guaranty:** This general, absolute, and unconditional Guaranty ("Guaranty") by the undersigned (collectively "Guarantor" or "my" or "I" or "me") is for the benefit of Shift4 Payments, LLC d/b/a Shift4 ("Company") and its affiliates and subsidiaries. For value received, and in consideration for the mutual undertakings contained in the Agreements, exhibits, and all other related agreements entered into between Merchant and Company or its parents, affiliates, successors, and assigns, I absolutely and unconditionally guarantee the full performance of all Merchant's obligations to Company, together with all costs, expenses, and attorneys' fees incurred by Company, its parents, affiliates, successors, or assigns, in connection with any action, inaction, or defaults of Merchant with respect to this Agreement or any other Agreement currently in effect or in the future entered into between Merchant or its principals and Company, its parents, affiliates, successors, or assigns. I waive any right to require Company, its parents, affiliates, successors, or assigns, to proceed against other entities or Merchant. There are no conditions attached to the enforcement of this Guaranty. I authorize, Company, its parents, affiliates or assigns to make from time to time any personal credit or other inquiries and agree to provide, at Company's request, financial statements and/or tax returns. I agree that this Guaranty shall be governed and construed in accordance with the State of Pennsylvania, and that the courts of Pennsylvania shall have and be vested with personal jurisdiction. The termination of this Agreement or Guaranty shall not release me from liability with respect to any obligations incurred before the effective date of termination. No termination of this Guaranty shall be effected by any change in my legal status or any change in the relationship between Merchant and me. This Guaranty shall bind and inure to the benefit of the personal representatives, parents, heirs, administrators, successors and assigns of Guarantor and Company.

**AGREED AND ACCEPTED:**  
DocuSigned by:

X

  
PRINCIPAL 1 SIGNATURE  
4F12CDD3736C4A9...

Megan Spencer  
PRINT NAME

X

PRINCIPAL 2 SIGNATURE

PRINT NAME

**ACH Authorization:** The fees and charges as specified in POS Exhibit A and the terms and conditions shall be debited from Merchant's account upon the execution of this Service Agreement and then on a monthly basis thereafter. All other charges payable hereunder shall be debited during the month in which they were incurred. Authorized Merchant Representative's signature below authorizes Shift4 Payments, LLC d/b/a Shift4 ("Company"), its affiliates, subsidiaries, designated assignees, or third party providers, including but not limited to Company, to initiate ACH transfer entries to credit and/or debit the account identified in the voided check provided to Company for the fees and charges incurred under the Service Agreement. This authorization shall remain in effect unless and until Company receives written notification from Merchant that this authorization has been terminated in such time and manner to allow Company to act.

**Credit Inquiry Authorization:** Authorization is hereby granted by the Merchant representative who has signed below to Shift4 Payments, LLC d/b/a Shift4 ("Company") to obtain a consumer credit report through a credit reporting agency chosen by Company. Authorized Merchant Representative understands and agrees that Company intends to use the consumer credit report for the purposes of evaluating my financial readiness to enter into this Service Agreement. Authorized Merchant Representative understands that this credit report will be retained on file at the Company office for use only by Company staff. This information will not be disclosed to anyone by Company without written consent unless required by law. Authorized Merchant Representative's signature below authorizes the release to the credit reporting agency of financial information which I have supplied to Company in connection with such an evaluation. Authorization is further granted to the credit reporting agency to use photostatic reproduction of this form if required to obtain any information necessary to complete my consumer credit report.

SIGNING BELOW GRANTS COMPANY AUTHORIZATION TO DEBIT THE MERCHANT ACCOUNT AS SET FORTH HEREIN AND GRANTS COMPANY PERMISSION TO THE RELEASE OF FINANCIAL INFORMATION TO THE CREDIT REPORTING AGENCY AND GRANTS PERMISSION FOR COMPANY TO OBTAIN A COPY OF MY CREDIT REPORT.

PLEASE READ THIS SERVICE AGREEMENT CAREFULLY TO ENSURE THAT YOU UNDERSTAND EACH PROVISION, INCLUDING YOUR REQUIRED USE OF COMPANY'S TRANSACTION PROCESSING SERVICES. THIS AGREEMENT REQUIRES THE USE OF ARBITRATION ON AN INDIVIDUAL BASIS TO RESOLVE DISPUTES, RATHER THAN JURY TRIALS OR CLASS ACTIONS, AND ALSO LIMITS THE REMEDIES AVAILABLE TO A MERCHANT IN THE EVENT OF A DISPUTE (PLEASE SEE SECTION 11 (e) FOR FURTHER DETAILS).

THE INITIAL TERM OF THE SERVICE AGREEMENT IS FOR TWELVE (12) MONTHS. PLEASE SEE SECTION 3 FOR FURTHER DETAILS.

BY THEIR EXECUTION BELOW, THE UNDERSIGNED AGREES TO ABIDE BY THE SERVICE AGREEMENT. THE SERVICE AGREEMENT CONSISTS OF THE POS EXHIBIT A, THE POS ORDER FORM, AND THE **SKYTAB POS SYSTEM SERVICE AGREEMENT** TERMS AND CONDITIONS. MERCHANT ACKNOWLEDGES RECEIPT OF SERVICE AGREEMENT TERMS AND CONDITIONS. THE SERVICE AGREEMENT REQUIRES THE USE OF COMPANY'S TRANSACTION PROCESSING SERVICES UNDER A SEPARATE MERCHANT TRANSACTION PROCESSING AGREEMENT. **THE TERMS OF EACH AGREEMENT ARE LOCATED AT [WWW.SHIFT4.COM/LEGAL](http://WWW.SHIFT4.COM/LEGAL).** MERCHANT WARRANTS THAT THE INFORMATION PROVIDED TO COMPANY IS COMPLETE AND ACCURATE.

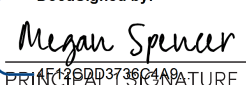
IN WITNESS WHEREOF, THE PARTIES HERETO HAVE CAUSED THIS AGREEMENT TO BE EXECUTED BY THEIR DULY AUTHORIZED REPRESENTATIVES EFFECTIVE ON THE DATE SIGNED OR APPROVED BY COMPANY.

**AGREED AND ACCEPTED:**      **The Refined Pantry LLC**

MERCHANT LEGAL NAME: \_\_\_\_\_

DocuSigned by:

X

  
PRINCIPAL 1 SIGNATURE  
4F12CDD3736C4A9...

Megan Spencer  
PRINT NAME

X

PRINCIPAL 2 SIGNATURE

PRINT NAME

Status: Completed

Source Envelope:

Signatures: 2

Initials: 0

Envelope Originator:

Anna Bourgeois

11

anna@vaultedsecurity.com

IP Address: 208.184.162.137

Status: Original

Holder: Anna Bourgeois

Location: DocuSign

## Timestamp

## Completed

Sent: 1/22/2024 8:22:11 AM

Viewed: 1/22/2024 8:22:58 AM

Using IP Address: 208.184.162.137

Signed: 1/22/2024 8:27:59 AM

Accepted: 9/4/2023 8:43:10 AM

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DocuSigned by:

Megan Spencer  
4F12CDD3736C4A9...

Sent: 1/22/2024 8:28:01 AM

Viewed: 1/22/2024 6:23:46 PM

Signed: 1/22/2024 6:24:21 PM

Accepted: 1/22/2024 6:23:46 PM

ID: 39d49420-4593-4043-89f2-f9f2ae3b6da2

## Timestamp

## Timestamp

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## Timestamp

## Timestamp

## Timestamps

Hashed/Encrypted

1/22/2024 8:22:11 AM

Security Checked

1/22/2024 6:23:46 PM

| Envelope Summary Events                    | Status           | Timestamps           |
|--------------------------------------------|------------------|----------------------|
| Signing Complete                           | Security Checked | 1/22/2024 6:24:21 PM |
| Completed                                  | Security Checked | 1/22/2024 6:24:21 PM |
| Payment Events                             | Status           | Timestamps           |
| Electronic Record and Signature Disclosure |                  |                      |

## **ELECTRONIC RECORD AND SIGNATURE DISCLOSURE**

From time to time, Vaulted Security, LLC (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

#### **How to contact Vaulted Security, LLC:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [cole@vaultedsecurity.com](mailto:cole@vaultedsecurity.com)

#### **To advise Vaulted Security, LLC of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [cole@vaultedsecurity.com](mailto:cole@vaultedsecurity.com) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

#### **To request paper copies from Vaulted Security, LLC**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to [cole@vaultedsecurity.com](mailto:cole@vaultedsecurity.com) and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

#### **To withdraw your consent with Vaulted Security, LLC**

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to [cole@vaultedsecurity.com](mailto:cole@vaultedsecurity.com) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

### **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

### **Acknowledging your access and consent to receive and sign documents electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Vaulted Security, LLC as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Vaulted Security, LLC during the course of your relationship with Vaulted Security, LLC.