

Secure Bancard, LLC 1500 Abbey Court | Alpharetta, GA 30004 1-855-271-1500

APPLICATION FOR MERCHANT AGREEMENT

SYNOVUS BANK	(Merchant Bank)
1125 First Avenue,	Columbus, GA 31901
706-649-4900	

Processor's Sales Rep Name: iBuxx Impact

AMJI Investment Group				Country View RV Park		
Merchant Legal Business Name				DBA Name		
1991 Kirbywills Cove				481 Coburn Rd		
Mailing Address				DBA Address (Physical, No	PO Boxes)	
Memphis	Tennessee	38119		Brownsville	Tennessee	e 38012
City	State	Zip		City	State 2	Zip
7317804327				9012928972		
Legal Phone #	Legal Fax #	_		DBA Phone #	DBA Fax #	
932570506	1 m _{Yrs.}	1 m _{Mos.} New bus	siness 📃 New owner 🛛 Seasc	nal? 📃 Yes 📃 No 🛛 List month	S	
Federal Tax ID # (Must be 9 digits)	Length O	wned	Business License	Date Opened:	01 aug 2023	
Merchant State registration		E-mail Address: KU		o site Address:	COUNTRYVIEW-R	VPARK.COM
			we	J Sile Address.		
Retail Restaurant Lodging escription of Business	Service	Internet% 🗌 Ma	il% 🗌 Tel	%		
Detailed Description of Business (ir RV Campground	ncluding produ	icts/services; card cha	rging policies; delivery metho	ds; whether own/finance invento	oryprovide separate pa	ges if needed):
Mailing Address (select	gal 🗌 DBA 🗌	Location Contact:	Kush Shah	Phone #	9012928972	
efund/Return Policy						
	or less 🔲 Mei	rchandise	Other:			
No refund Refund in 30 days		rchandise	Other:			
Refund/Return Policy No refund Refund in 30 days Merican Express Disclosure The "NCR" party listed throughout t NCR Payment Solutions, LLC 864 Spring Street, Atlanta, GA 3030	this Application			American Express, or will conve	ey American Exper ss sale	es on your behal

Merchant initials K S

PATRIOT AC PATRIOT ACT obtain, verify and ask for your na license or other	I / Site Survey REQUIREMENTS - nd record information me, physical address r identifying documen	To help t that ider , date of ts. Comp	he governmer ntifies each pe birth, taxpaye lete Sections	nt fight the fu rson (includiu r identificatio I and II and I	nding of terr ng business n number ar III. (*In Sec	orism and entities) nd other i tion II, Dr	d money laundering a who opens an accour nformation that will al iver's License require	activities, the nt. What this llow us to ide ed use othe	USA Pat means fe ntify you er ID only	riot Act requires or you: When yo . We may also a <mark>/ if no Driver's Li</mark>	all financ ou open ar sk to see cense issi	al institutions to account, we will your driver's ued.)
Business	Section 1: Business Form of Identification			Applicable Items Reviewed:			Section II: Individual Form of Identification			Applicable Items Reviewed:		
			Business Na	ime:								
Govt Issued Bu	isiness License		Date and Pla Issuance:	ace of		D	Privers License:	107206906		Name:	Kı	ushal Shah
Tax Return							state ID:			Date of Birth:		' may 1980
Corporate Reso			ID/Tax ID Nu	umber: 93	2570506		assport:			DL/ID#:		7206906
Entity Agencies		_					1ilitary ID: 1exican Consulate			Date of Issuan		
Business finance	cial Statement		Expiration D	ate:			D:			State of Issuar	nce: No	one
Partnership Ag	reement									Expiration:		ay 17, 2020
			Type Fin'l S'	t		R	Resident Alien ID:			Address:	19 C	991 Kirbywills ove
Section III										•		
On site visit	done by Sales Rep		🔲 Bı	isiness Cons	sistent with A	pplicatio	n (including any e-Co	mmerce add	endums	(s))		
Address of lo	ocation inspected:		BA Address	📃 Legal	Address	URL	listed in eCommerce	e addendum		Other Addres	is:	
Does name nos	sted at business mate	h name	on application	Yes N	10	Doe	s inventory volume a	ppear to be s	ufficient	? Ves No		
	ave appropriate busi			No			store hours posted?				/td>	
	erchant's inventory?			Samples? 🗌	Yes 🗌 No	Did yo	ou get Interior/exterio	r photos? 🔲	Yes 🗌 I	No		
Was inventory	consistent with merch	ant's typ	e of business'	? 🔄 Yes 📃			Comments:					
•	Sales Representative:						Date:		1			
* By signing ab address and (ir	ove you hereby ackn i the case of informat	owledge ion listed	that the inform below in the e	nation listed l e-Commerce	herein is true addendum(e and acc s)) indica	urate and was perso ated URL(s) as applic	nally observe able.	d on the	indicated docur	ment, and	at the indicated
Principal Infor	mation											
Principal's	Title	Date of	Birth	Ownership	% of Time	Social S	ecurity # (Processor's	privacy	F	Residential Addre	ess	Residential
Name		Duite et	2	% / Years	Spent In		or collection and use of		•	(City, State, Zip		Phone #
					Business	security	numbers can be foun	d at				
						www.se	curebancard.com)					
Kushal Shah	Owner			51/1 month		******642	26		1991 Kirt 38119	oywills Cove, Mem	phis, TN,	9012928972
Bank Informat	ion							-				
Name of Financ	ial Institution			Account num	number R		Routing # Phone #		Contact D		Date Ope	ened
InSouth Bank			*	****1470			084301408					
*AUTHORIZATION FOR AUTOMATIC FUNDS TRANSFER (ACH): The Merchant Bank (defined below) is authorized to initiate or transmit credit and/or debit and/or check entries to the account identified relating to the above account for the services contemplated under this Agreement. Said authority is granted to Merchant Bank's processor and their agents. REQUIRED: ATTACH VOIDED CHECK Please select one for ACH account type listed above: Checking account Savings account Bank GL account												
Trade / Busine	ess References											
Trade Name		Accou	unt #		Product S	old		Phone #' (I	No 800 #	ts)		
None		None						None None				
None		None						None None				
Other busin	esses in which mero	hant or	a principal ar	re now or pr	eviously ha	ive been	involved as owner/	operator/dire	ector:			

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Processing Information			
Card Types Accepted:	 All Visa/MasterCard/Discover Cards All Discover Cards JCB** American Express ** Diners/Carte Blanche** 	MasterCard Credit Car Visa Credit Cards and MasterCard Debit card Visa Debit cards only PIN Based Debit/EBT	ds only
Projected total annual sales \$ Projected Visa/MC/DISC/Amex Sales Monthly \$ <u>25000.0</u> 0 Annual \$ Projected Visa/MC/DISC/Amex High \$ <u>2500.00</u>	Electronic key-entered (with imp Electronic card not present (w/o OR Touch-tone card not present (wi Ticket Touch-tone card not present (no Mail/Telephone Order (card not eCommerce (card not present)	strints) 5 % ut imprints) None % ith imprints) % %	6 Do you use a 3rd party fulfillment? 6 No 6 If "yes" 6 Contact name and phone number: 6 Name:
	ternet: supply copy of print advertising, catalogs io tape (Radio or IVR), and Web-page screen pri o getting signature? IN No Yes		Do you bill your customer prior to goods being shipped? If yes, how many days? 0-2 days 3-30 days 31-60 days 60-90 days Over 90 days
How do you advertise? 🗌 Yellow pag	es 🗖 Telemarketing 🗖 Catalog 🗖 Internet 🗐 We	ord of mouth Publications Mass/I	Direct mail 🔲 Other
statements. If you are a MO/TO or e-O Actual chargeback volume for most re # of locations? If yo None	before? Yes No If Yes: Processor Name Commerce merchant, please provide most recen ecent 3 months \$6 i u are affiliated with an existing account, please p ependent contractors or agents or merchant s	t 6 months of processing statements.) months \$ provide existing merchant ID#:	
Merchant Owns Leases Location	(s)?	How long at current locations(s)?:	
Name/address of mortgage holder/landl	. ,		
Other significant Merchant Contacts with			
American Express Existing Accounts: If you currently accept AXP payments	, and your AXP volume is less than \$1MM annua	ally, you must submit your existing AXI	P#. We will assign you a new AXP # for this
account. Existing AXP SE #: If you currently accept AXP payments	in excess of \$1MM annually, please provide you	ur existing AXP#, so so we can convey	/ this to AXP on your behalf.
New Accounts: If you do not currently accept AXP # p accepting AXP payments. AXP SE #:		1MM, if you request AXP, we will assig	gn you an AXP # for this account, so you can start
If you do not currently have an AXP #	, and your annual volume is more than \$1MM, w	e will contact AXP on your behalf.	
offers or promotions of AXP products		s (such as traditional mail and telephor	Promotions: If you do not wish to receive future ne), please contact customer service at the phone equest.
Call Secure Bancard, LLC Customer	Service at: 1-855-271-1500		
. .	Il Card Association card types. Some Point Of S esponsibility to enforce this. If you request AXP a		hibit the acceptance of specific types of payment of Merchant Bank, will settle American Express.
** Denotes Services and Programs I Merchant Bank has no responsibility	isted above or below in this Application, whic or liability therefor.	h are provided by Processor and its	contractors and not by Merchant Bank.

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Merchant initials_____K S

FEE	SCHEDUL
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Model				Purchase	Purcha	se			Purc	hase	Mercha	nt	I	
			Qty	New	Refurb		Ren	t		r Source	Owned			Price
Terminal Terminal								_					\$ \$	
Printer							-						э \$	
PIN Pad													\$	
Imprinter				Purchase Only										
Other							_						\$	
													\$	
Shipping, handling and tax will be Equipment Billing to:	e billed in ac	ddition to		<i>quipment price listed</i> erchant Agent C										
Ship Equipment to:				3A 📃 Legal 📃 Agent										
Send Welcome Kit to:				3A Legal Agent										
Merchant training provided by:			_ Pro	ocessor 🗌 Agent 🔤 🤇	Other:									
SERVICE ACCEPTANCE AND Discount Rates Interchange F			t Rate	% Per Item \$		Associatio	on Dues	& Asses	sments	Pass Through				
Rate 1	%	Per Item		ate 2		%			Rate 3	r abo rinough		%		Per Item S
Visa Qual Credit	3.79			isa Mid-Qual Credit						-Qual Credit		-		
Master Card Qual Credit	3.79			laster Mid-Card Qual Credit						on-Card Qual Credit				
Discover Network - PayPal Qual Credit	3.79			iscover Netword - PayPal M		it				Network - PayPal Non-Q)ual Credit			
											-			
American Express Qual Credit	3.79			merican Express Mid-Qual (isa Mid-Qual Debit	Credit					Express Non-Qual Cred	ш			
Visa Qual Debit	3.79									-Qual Debit				
Master Card Qual Debit	3.79			laster Card Mid-Qual Debit			_			ard Non-Qual Debit				
Discover Network - PayPal Qual Debit	3.79			iscover Network - PayPal M	ııa-Qual Debit	L .				Network - PayPal Non-Q	yual Debit			
Pin Debit			E	BT					Star			\$1 per n	nonth	
			Blanch	ne%	A	merican Expr	ess Dis	scount	rate%	OR				
Monthly Flat Fee: \$				s Pay 📃 Daily G										
-	None			s Pay 🔲 Daily G	iross Pay		Tra							
Est. Annual Amex Volume: \$	None		Gros	s Pay 🔲 Daily G	iross Pay erage Ame	Retail \$ Retail \$ ex Ticket: \$	Tra	ans Fee	+	% or 🗆 🔜	<u>s</u>			
Est. Annual Amex Volume: \$ AMEX Pay Frequency 3 Miscellaneous Fees:	None 3 day	Monthly	Gros:	s Pay Daily G Est. Ave 30 day Amex I	eross Pay erage Ame Fees disc	Retail \$ No ex Ticket: \$ losed in this s	Tra	ans Fee are bil	+	% OR				
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Est. Annual Amex Volume: \$ AMEX Pay Frequency 3 Miscellaneous Fees: Monthly Statement Fee \$ Chargeback/Retrieval Fee \$	None 3 day 5 Applica 25.00/15 &ach	Monthly 15 da tion/Se Montl	Gross y up Fe	s Pay Daily G Est. Ave 30 day Amex I ee \$ <u>None</u> ACH Reje nimum: \$ <u>None</u> V	iross Pay erage Ame Fees disc ect/Chang oice Auth	Retail \$ ex Ticket: \$ losed in this s ge Fee \$ /ARU Fee \$	ne section Onli	ans Fee are bil ine Mer ACH B	ed by chant atch Fe	% OR American Express American Express Portal \$ None mc	onthly each			
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Merchant initials

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eCommerce Application Addendum										
Number of e-Commerce websites:		complete, ii	nitial and	d attach an additional co	opy of this page for each addition	al website)				
Website URL: COUNTRYVIEW- RVPARK.COM	Website server IP Address:									
Customer Service: email address:	KUSHAL517@GMAIL.COM	Telephor	ne:	7317804327	List all links to other websites	s:				
Web Hosting Service Name:		Address:			Contact Telephone:					
Fullfillment House Name:		Address:			Contact Telephone:					
How do you advertise:					log/print/broadcast/telemarket	ing script)				
Do you bill customer's card before shipping product or performing service? If Yes, how many days before?										
What is your return/refund policy?										
Digital Certificate Issuer:				ite Security Method: I Cert No(s)/Exp Date	(s)	0	venership			
For purposes of this application, "Processor" is Secure Bancard, LLC, 1500 Abbey Court, Alpharetta, GA 30004 and can be contacted at 1-855-271-1500 and "Merchant Bank" is										
Synovus Bank, 1125 First Avenue, Columbus, GA 31901, 706-649-4900.										
Merchant Signatures and Guarantor Signa	atures									
Synovs bank, 1125 Hist Avenue, Columbus, GA 31901, Yie-484-4900. Merchant Signatures and Quarantor Signatures Agreement Signature: By signing below, each of the Merchant and Guarantor(s) and Merchant principal(s) and owner(s) (1) certifies, under penalty of perjury, that all information and documents submitted with this Application are true and complete. (2) authorizes Merchant Bank, Processor and their respective agencies on persons signing below as a principal or owner of Merchant or as a Guarantor (if such person asks Merchant Bank or Processor with ereports from consumer report was requested, Merchant Bank or Processor will utel such person, and if Merchant Bank or Processor preview a report. Merchant Bank or Processors will give such person the name and address of the agency that furnished it); (3). acknowledges receipt of the Merchant Card Processing Agreement ("Agreement") including the Continuing Guaranty ("Guaranty") contained within the Agreement, and of the CNP Addendum, Special Services Addendum and the Merchant Use and Disclosure of BIN Information Addendum (each, an "Addendum"), each of which documents is incorporated herein by this reference, and agrees to be bound by and perform in accordance with all provisions, terms and conditions of the Agreement, the Guaranty, and each such Addendum; (4) agrees to be bound by and perform in accordance with all provisions, terms and conditions of the Agreement. Affiliate Agreement currently exists or is executed, amended, or supplemented at some future date; (5) agrees that Processor and its agents and Merchant Bank may rely upon copies or facsimiles of this Application bearing Merchant Affiliate Agreement"), regardless of whether such Merchant Affiliate Agreement currently exists or is executed, amended, or supplemented at some future date; (5) agrees that Processor and its agents and Merchant Bank may rely upon copies or facsimiles of this Application bearing Merchant Sant Guarantor(s)'s signatures, or on copies or facsimiles of other documen										
MERCHANT SIGNATURES				GUARANTOR	SIGNATURES					
					<u> </u>					
XIII Contraction	Aug. 03, 2023			VI) b		A	ug. 03, 2023			
Principal/Owner for Merchant	Date			<u>X 1)</u> Guarantor Signat	ture (No Titles)	Dai	5			
Kushal Shah	Owner			Kushal Shah		Da				
					Fitles)					
Print Name	Title			Print Name (No 1	lities)					
X 2)				X 2)						
Principal/Owner for Merchant	Date			Guarantor Signat	ture (No Titles)	Da	te			
Print Name	Title			Dript Name (No. 3	Titles)					
Print Name	The			Print Name (No 1						
<u>X 3)</u>				X 3)						
Principal/Owner for Merchant	Date			Guarantor Signat	ture (No Titles)	Dat	te			
 Print Name	Title			Print Name (No 1	Titles)					
				wante (140 1	····					
		_								
FOR INTERNAL USE ONLY										
X)				X)						
Accepted by Processor	Date			Accepted by Mer	chant Bank	Dat	te			

Print Name

Title

Print Name

Title

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Merchant initials

Merchant Beneficial Ownership and Management Information Certification: The following information and certifications concerning beneficial ownership, and the identification of beneficial owner(s), of the Merchant identified in the Merchant Application referenced below, must be provided for the Merchant if a legal entity (legal entity includes a corporation, limited liability company or other entity that is formed by filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States). (This form need not be used for a Merchant identified in the Merchant Application as a "sole proprietor" or "sole proprietorship", provided the prescribed forms of Merchant Application including any Patriot Act/customer identification forms and taxpayer identification/withholding forms included therein or prescribed for use therewith reflect such sole proprietorship status and are completed and executed by such sole proprietor and the Processor's representative.) The beneficial ownership/management information and certification including any patriot Act/customer identification including any other Patriot Act/customer identification on and certifications regarding the Merchant legal entity required elsewhere in the prescribed form of Merchant Application including any other Patriot Act/customer identification forms and taxpayer identification forms included therein or prescribed for use therewith. Notice: To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person (including business entities) who opens an account. What this means for you: When you open an account we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. In some instances we may use outside sources to co

Section 1: Merchant Application Information (Must match information in Merchant Application): Date Application Signed (by Authorized Signer named below): Aug. 03, 2023

Merchant Legal Name:	Kushal Shah	Merchant Federal Tax ID (as it appears on income tax return):	None	Merchant State of formation/Incorporation:
TN Merchant Address:	1991 Kirbywills Cove	e, Memphis, TN, 38119		Merchant Entity Type
LLC				

Section 2: Beneficial Ownership and Management Information. Provide the information below on each individual who directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25% or more of the equity interests of the Merchant legal entity identified above. If the total ownership interests of individuals does not exceed 50% of the equity interests of the Merchant, provide the information below on additional beneficial owners so that the total ownership interests of individuals for which information is provided below exceeds 50%. (Use extra copies if needed.) Information must be provided for one individual with significant responsibility for managing the legal entity listed in Section 1, a "Control Prong". Examples of a Control Prong include, but are not limited to: Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer. If no other Beneficial Owner identified below is identified in the right column as the Control Prong, the Control Prong section below must be completed.

Beneficial Owner Legal Name Kushal Shah	Title Owner			% of Legal Entity OwnerShip: 51 %
Individual's Home (Street) Address (No P.O. Box) 1991 Kirbywills Cove	City, State, Zip Memphis, TN, 38119	Date of birth 17 may 1980		
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? I Yes No	(SSN)/Individual Taxpayer Ide *******6426	Control Prong?		
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance TN	Expiration Date 17 may 2020	Number on ID: 107206906	
Beneficial Owner Legal Name	Title			% of Legal Entity OwnerShip: None %
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? Ves Mo	(SSN)/Individual Taxpayer Ide	ntification No. (I	TIN):	Control Prong?
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance	Date Issued None	Expiration Date None	Number on ID:
Beneficial Owner Legal Name	Title		% of Legal Entity OwnerShip: None %	
Individual's Home (Street) Address (No P.O. Box)	City, State, Zip		Date of birth None	
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? I Yes I No	(SSN)/Individual Taxpayer Ide	Control Prong?		
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance	Date Issued None	Expiration Date None	Number on ID:
Beneficial Owner Legal Name	Title			% of Legal Entity OwnerShip: None %
Individual's Home (Street) Address (No P.O. Box)	City, State, Zip Memphis, ,			Date of birth None
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? U Yes INO	(SSN)/Individual Taxpayer Ide	ntification No. (I	TIN):	Control Prong?
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance	Date Issued None	Expiration Date None	Number on ID:
Control Prong (and/or 🗌 additional Beneficial Owner) Legal Name Kushal Shah	Title Owner			% of Legal Entity OwnerShip: 51 %
Individual's Home (Street) Address (No P.O. Box) 1991 Kirbywills Cove	City, State, Zip Memphis, TN, 38119			Date of birth 17 may 1980
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? I Yes No	(SSN)/Individual Taxpayer Ide *******6426	ntification No. (I	TIN):	Control Prong?
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance TN	Date Issued 28 may 2015	Expiration Date 17 may 2020	Number on ID: 107206906

*For US persons provide unexpired Driver's License unless there is none; for non-US persons ID Type may be unexpired Resident Alien ID, or Passport/Other ID± and Country of issuance. ± Specify type of "Other ID", which may be any other unexpired government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

Certifications and Signatures:

Certifications and Signatures: The undersigned Authorized Signer, listed above as a Beneficial Owner or Control Prong, who has signed the Merchant Application on behalf of the Merchant, hereby certifies that he/she is authorized to open accounts for the Merchant at financial institutions, that all information provided above about the Merchant legal entity is complete and correct and that, to the best of his/her knowledge, all information provided above about each individual listed above. The Authorized Signer and the Processor's Representative, each hereby certify that the information listed above regarding the identity and the identification document of each individual listed above, is complete and correct and was personally observed on the indicated document.

Aug. 03, 2023

Kushal Shah

Authorized Signer Signature

Processor's Rep. Signature

Date Signed Processor's Rep. Printed Name

ΚS

VISA DISCLOSURE PAGE

Member Bank (Acquirer) Information:

Acquirer Name:	Synovus Bank
Acquirer Address:	1125 First Avenue, Columbus, GA 31901
Acquirer Phone:	(706) 649-4900

Important Member Bank (Acquirer) Responsabilities:

- 1. A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant.
- 2. A Visa Member must be a principal (signatory) to the Merchant Agreement.
- 3. The Visa Member is responsible for and must provide settlement funds to the Merchant.
- 4. The Visa Member is responsible for all funds held in reserve that are derived from settlement.
- 5. The Visa Member is responsible for educating Merchants on any Visa International Operating Regulations with which Merchants must comply during the course of operation.

Important Merchant Responsibilities:

- 1. Ensure compliance with cardholder data security and storage requirements.
- 2. Maintain fraud and chargebacks below thresholds.
- 3. Review and understand the terms of the Merchant Agreement.
- 4. Comply with Visa International Operating Regulations.

The responsibilities listed above do not supersede terms of the Merchant Agreement and are provided to ensure the Merchant understands some important obligations of each party and that the Visa Member (Acquirer) is the ultimate authority should the Merchant have any problems.

Merchant Signature

	Aug. 03, 2023
Merchant's Signature	Date
Kushal Shah	Owner
Merchant's Printed Name	Title