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: Vaulted Chris CP

TEA-REX CORPORATION Merchant Legal Business Name					
Merchant Legal Business Name				TEA REX CO	
Silain Logai Lubilloss Haille				DBA Name	
2920 JOHNSTON ST				2920 JOHNSTON ST	
Mailing Address				DBA Address (Physical, No PO Boxes)	
LAFAYETTE	Louisiana	70503		LAFAYETTE	Louisiana 70503
City	State	Zip		City	State Zip
7139925054				7139925054	
Legal Phone #	Legal Fax #			DBA Phone #	DBA Fax #
834483864			usiness New owner Seasonal?	Yes No List months	
Federal Tax ID # (Must be 9 digits)	Length C	Owned	Business License	Date Opened: 23 apr 2019	
		_ ,,,,,	NIV7010@GMAIL COM	· ·	
Merchant State registration		E-mail Address: _	Web site	e Address:	
Any prior No	Yes If yes:	Personal Busi	ness If yes, how long		
Type of Sole Propri	ietorship 🔳 L	LC Partnership	Ltd Partnership Corp, check one	e: Public Private Non	Other
Business Type					
Description of Business		_		_	
Detailed Description of Business (in QUICK SERVICE TEA SHOP	ncluding produ	ucts/services; card cl	narging policies; delivery methods; w	whether own/finance inventoryprovide	e separate pages if needed):
Mailing Address (select Le	ngal DRA	Location Contact:	JENNY VO	Phone #	7139925054
Mailing Address (Scient	gai DDA _	_ Location Contact		Hone #	
Refund/Return Policy					
No refund Defund in 20 days	or loss TAS	orchandico	Othors		
■ No refund ■ Refund in 30 days	oi iess 🔲 Me	acialuise	Other:		
American Express Disclosure					
- Aprilogo Brigoroguite					
The "NCD" party listed throughout t	his Applicatio	on and the Merchant	Agreement is your acquirer for Amer	rican Express, or will convey American	Exper ss sales on your behalf:
THE INCR PARTY IISTER HITOURINOUL L	• •			, ,	
NCR Payment Solutions, LLC	าล				
	08				
NCR Payment Solutions, LLC	08				2/8/2024
NCR Payment Solutions, LLC 864 Spring Street, Atlanta, GA 3030	08		DUY LE / Owner		2/8/2024 Feb. 03, 2024

Trade / Business References

Account #

None

None

Trade Name

None

None

Product Sold

Other businesses in which merchant or a principal are now or previously have been involved as owner/operator/director:

Phone #' (No 800 #s)

None None

Sign Envelope ID: F78EC36D-5E5	8-484E-B7A3-14C03FC200AC		Merchant initials DL
Processing Information			
· .	 All Visa/MasterCard/Discover Cards All Discover Cards JCB** American Express ** Diners/Carte Blanche** 		only
Projected total annual sales \$	Electronic card-swiped transaction	ons <u>95</u>	Projected avarage Visa/MC/DISC/Amex ticket size 20.
	Electronic key-entered (with impr		<u></u> %
Projected Visa/MC/DISC/Amex Sales Monthly \$35000.00 Annual \$	Electronic card not present (w/ou	it imprints) <u>None</u>	% Do you use a 3rd party fulfillmen
Monthly \$55000.00 Annual \$	Touch-tone card not present (with	h imprints)	
Projected Visa/MC/DISC/Amex High Tid			
\$200.00	Mail/Telephone Order (card not p	oresent) <u>None</u>	% Name:
	eCommerce (card not present)	None	% Phone:
	NOTE: TOT	AL (must equal 100%)	
	ernet: supply copy of print advertising, catalogs a tape (Radio or IVR), and Web-page screen prin		Do you bill your customer prior to goods be shipped? If yes, how many days? 0-2 c 3-30 days 31-60 days 60-90 days
How do you advertise? Yellow pages	Telemarketing Catalog Internet Wo	ord of mouth Publications M	ass/Direct mail Other
Have you ever accepted credit cards be	efore? 🗌 Yes 🗌 No If Yes: Processor Name 🔙	(Please p	provide the most recent 3 months of processing
statements. If you are a MO/TO or e-Co	mmerce merchant, please provide most recent	6 months of processing statement	nts.)
None	are affiliated with an existing account, please pr	-	o cardholder data:
Merchant Owns Leases Location(s)?	How long at current locations(s))?:
lame/address of mortgage holder/landlor	rd:		
Other significant Merchant Contacts with	third parties:		
American Express			
Existing Accounts:			
		lly, you must submit your existing	AXP#. We will assign you a new AXP # for this
account. Existing AXP SE #:			
If you currently accept AXP payments in	n excess of \$1MM annually, please provide you	r existing AXP#, so so we can co	nvey this to AXP on your behalf.
New Accounts: If you do not currently accept AXP # paraccepting AXP payments. AXP SE #:	-	.MM, if you request AXP, we will	assign you an AXP # for this account, so you can
accepting AAP payments. AAP SE #: _			
If you do not currently have an AXP #, a	and your annual volume is more than \$1MM, we	will contact AXP on your behalf.	

Merchant has the right not to accept all Card Association card types. Some Point Of Sale software and programs cannot prohibit the acceptance of specific types of payment cards; therefore, it is the merchant's responsibility to enforce this. If you request AXP and qualify, NCR as processor, and not Merchant Bank, will settle American Express.

Call Secure Bancard, LLC Customer Service at: 1-855-271-1500

^{**} Denotes Services and Programs listed above or below in this Application, which are provided by Processor and its contractors and not by Merchant Bank. Merchant Bank has no responsibility or liability therefor.

DS	Merchant initials	
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** Equipment Options														
		0	h.	Purchase		hase Irbished		Dont		chase	Mercha Owned		T	Price
Model Terminal		Qt	Ly	New	Reiu	irbisneu		Rent	Oth	er Source	Owned		\$	Price
Terminal													\$	
Printer													\$	
PIN Pad Imprinter				Purchase Only									\$	
Other				Fulchase Only									\$	
0.1.0.													\$	
		1.00												
Shipping, handling and tax will be a Equipment Billing to:	oillea in ad	aaition to tr	ne eq	chant Agent C	<i>above.</i> Ither									
Ship Equipment to:				A Legal Agent		er:							_	
Send Welcome Kit to:				A Legal Agent										
Merchant training provided by:			Pro	cessor Agent (Other:									
SERVICE ACCEPTANCE AND F	FF SCHE	DULF												
Discount Rates Interchange Pa	ss Through	Discount R		% Per Item \$			Association	Dues & Asse	essment Rate 3	s Pass Through		%		Per Item \$
Visa Qual Credit	3.84	0.00	Vis	a Mid-Qual Credit					Visa No	n-Qual Credit				
Master Card Qual Credit	3.84	0.00	Ma	ster Mid-Card Qual Credit					Master	Non-Card Qual Credit				
Discover Network - PayPal Qual Credit	3.84	0.00	Dis	cover Netword - PayPal M	id-Qual C	redit			Discove	er Network - PayPal Non-	Qual Credit		T	
American Express Qual Credit	3.84	0.00	Am	erican Express Mid-Qual (Credit				America	an Express Non-Qual Cre	edit		T	
Visa Qual Debit	3.84	0.00	Vis	a Mid-Qual Debit					Visa No	n-Qual Debit			T	
Master Card Qual Debit	3.84	0.00	Ma	ster Card Mid-Qual Debit					Master	Card Non-Qual Debit				
Discover Network - PayPal Qual Debit	3.84	0.00	Dis	cover Network - PayPal M	id-Qual D	ebit			Discove	er Network - PayPal Non-	Qual Debit			
Pin Debit			EB	Т					Star			\$1 per m	onth	1
Visa Rewards (Discount Rate \$ 3.8 Amex Rewards (Discount Rate \$ 3 Non-Bankcard Types Accepted JCB Card % Monthly Flat Fee: \$ Est. Annual Amex Volume: \$ 4 AMEX Pay Frequency 3 compared 3 compar	Diners	item 0.00 Item 0.00 S Carte Bla Monthly G	iross	Pay Daily G	rage A	America ay R	an Expresentation and Expresenta	e	Rate \$_ t rate%	OR OR				
Monthly Statement Fee \$ Application/Setup Fee \$ 0.00 ACH Reject/Change Fee \$ Online Merchant Portal \$ monthly Chargeback/Retrieval Fee \$ 15.00/12 @ ACH Monthly Minimum: \$ 0.00 Voice Auth/ARU Fee \$ None ACH Batch Fee \$ 0.00 each ACH Debit \$1.00 Upon Account Approval AVS Fee \$ each CVV2 Fee \$ each Tokenization Fee \$ 0.00 each Annual Fee \$ 0.00														
** Administrative Maintenance 0.00 Monthly bill minimum:	Fee \$ 45.0	mont	hly *	PCI Non Complia	nce Fe	e \$ 0.00	monthly	/ ** Gatewa	y Fee S	0.00 monthly				
** Other \$ per None	_ Descrip	otion		**	Other		Nor per		ription					
** Other \$ per	_ Descrip	otion	Fee	0.00	Other	None \$	per	Desc	ription					
0.00 Authorization Fees: \$		an Express	0.0		0.00 \$	Visa	0.00 \$	Discover	\$					

See Sections 13.b.iv and 18 of the Agreement for other fees that may be assessed due to the action or inaction of Merchant.

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eCommerce Application	n Addendum								
Number of e-Commerc	ce websites:		(If more than	1, complete, ir	nitial	and attach an additional	copy of this page for each addition	al website)	
Website URL:		Website serv Address:	ver IP			Website DBA:			
Customer Service: em	ail address:	CNV7919@G	MAIL.COM	Telephone:		7139925054	List all links to other websites:		
Web Hosting Service I	Name:			Address:			Contact Telephone:		
Fullfillment House Na	me:			Address:			Contact Telephone:		
How do you advertise	:				(Attach samples; e.g., catalog/print/broadcast/telemarketing script)				
Do you bill customer's Yes No	card before ship	ping product	or performi	ng service?		es, how many days			
What is your return/re	fund policy?				We	bsite Security Method	l:		
Digital Certificate Issu	er:		_		Dig	gital Cert No(s)/Exp Da	ite(s)		venership ed Individual

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 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 agents to verify any of the information given, including credit references, and to obtain individual and/or business credit reports, including requesting reports from consumer reporting agencies on persons signing below as a principal or owner of Merchant or as a Guarantor (if such person asks Merchant Bank or Processor whether or not a consumer report was requested, Merchant Bank or Processor will tell such person, and if Merchant Bank or Processor received a report, Merchant Bank or Processor 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 terms, conditions and provisions of any Merchant Card Processing Agreement between any Merchant Affiliate of Merchant and Processor and its agents and Merchant Bank ("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's and Guarantor(s)'s signatures, or on copies or facsimiles of ther documents bearing Merchant's and Guarantor(s)'s sign

AMERICAN EXPRESS - In the event I am not eligible for NCR and Secure Bancard's OptBlue program for American Express, by signing below, I representthat I have read and am authorized to sign and submit this application for the above entity, which agrees to be bound by the American Express® Card Accep-tance Agreement ("American Express Agreement"), and that all information provided herein is true, complete, and accurate. I authorize NCR, Secure Bancard, and American Express Travel Related Services Company, Inc. ("American Express") and American Express's agents and Affiliates to verify the information inthis application and receive and exchange information about me personally, including by requesting reports from consumer reporting agencies from time to time, and disclose such information to their agent, subcontractors, Affiliates and other parties for any purpose permitted by law. I authorize and direct Secure Bancardand American Express and American Express's agents and Affiliates to inform me directly, or inform the entity above, about the contents of reports about methat they have requested from consumer reporting agencies. Such information will include the name and address of the agency furnishing the report. I alsoauthorize American Express to use the reports on me from consumer reporting agencies for marketing and administrative purposes. I am able to read andunderstand the English language. Please read the American Express Privacy Statement at http://www.americanexpress.com/privacy to learn more about howAmerican Express protects your privacy and how American Express uses your information. I understand that I may opt out of marketing communications byvisiting this website or contacting American Express at 1-800-528-5200. I understand that upon American Express' approval of

Guaranty: The undersigned Guarantor(s), individually and severally, guarantee the full and faithful performance and payment by the Merchant (identified above in the portion of this Application which precedes this Guaranty) of each and all of Merchant's duties and obligations to Merchant Bank and Processor, as provided in Section 25 of the Merchant Card Processing Agreement, which Merchant Card Processing Agreement, and this Application and the Addendums mentioned above, are incorporated into this Guaranty by this reference.

the application, the entity will be provided with the American Express Agreement and materials welcoming it to American Express' Card acceptance program.

MERCHANT SIGNATURES		GUARANTOR SIGNATURES	
DocuSigned by:	2/8/2024	DocuSigned by:	2/8/2024
X 1 Doctosyned by.	Feb. 03, 2024	× 1) rep	Feb. 03, 2024
Principal/Owner for Merchant	Date	Guarantor Signature (No Titles)	Date
DUY LE	Owner	DUY LE	
Print Name	Title	Print Name (No Titles)	
X 2)		X 2)	
Principal/Owner for Merchant	Date	Guarantor Signature (No Titles)	Date
Print Name	Title	Print Name (No Titles)	
X 3)		X 3)	
Principal/Owner for Merchant	Date	Guarantor Signature (No Titles)	Date
Print Name	Title	Print Name (No Titles)	
FOR INTERNAL USE ONLY			
X)		X)	
Accepted by Processor	Date	Accepted by Merchant Bank	Date
Print Name	Title	Print Name	Title

S	Merchant initials	
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Merchant Beneficial Owner(s), of the Merchant Information Certification: The following information and certifications concerning 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 in this form is in addition to, not a substitute for, the information 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 confirm the information. Secure Bancard's privacy policy can be found at http://www.secu

Section 1: Merchant Ap Feb. 03, 2024	plication Information	(Must match information in Merchant Application): Date Application	tion Signed (by	Authorized Signer named below):
Merchant Legal Name: _	DUY LE	Merchant Federal Tax ID (as it appears on income tax return):	834483864	Merchant State of formation/Incorporation
LA Merchant Address:	104 DEER PARK LN	I, LAFAYETTE, LA, 70508	Mer	rchant 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 of those 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 DUY LE	Title Owner			% of Legal Entity OwnerShip: 100 %
Individual's Home (Street) Address (No P.O. Box) 104 DEER PARK LN	City, State, Zip LAFAYETTE, LA, 70508			Date of birth 09 jul 1987
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes □ No	(SSN)/Individual Taxpayer Ide	entification No. ([ITIN]:	Control Prong?
Id Type:* ■ Driver's License □ Other State photo ID showing residence □ Passport □ Resident Alien ID □ Other ID ±	State/Country of Issuance LA	Date Issued 24 jun 2023	Expiration Date 09 jul 2029	Number on ID: 012018432
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? ☐ Yes ■ No	(SSN)/Individual Taxpayer Ide	entification No. ((ITIN):	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		1	% 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? ☐ Yes ■ No	(SSN)/Individual Taxpayer Ide	entification No. ((ITIN):	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		1	% of Legal Entity OwnerShip: None %
Individual's Home (Street) Address (No P.O. Box)	City, State, Zip LAFAYETTE, ,			Date of birth None
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ☐ Yes ■ No	(SSN)/Individual Taxpayer Ide	entification No. ((ITIN):	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 DUY LE	Title Owner			% of Legal Entity OwnerShip: 100 %
Individual's Home (Street) Address (No P.O. Box) 104 DEER PARK LN	City, State, Zip LAFAYETTE, LA, 70508			Date of birth 09 jul 1987
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes □ No	(SSN)/Individual Taxpayer Ide	entification No. ((ITIN):	Control Prong?
Id Type:* ■ Driver's License □ Other State photo ID showing residence □ Passport □ Resident Alien ID □ Other ID ±	State/Country of Issuance LA	Date Issued 24 jun 2023	Expiration Date 09 jul 2029	Number on ID: 012018432
			1	

Certifications and Signatures:

2/3/2024

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 is complete and correct and there is no individual who directly or indirectly owns 25% or more of the Merchant legal entity's equity interests whose information is not provided 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.

Feb. 03, DU 1997	2/8/2024	Duy Le	Docusigned by: Anna Bourgeois
Anna Bourgeois Aut	horized Signer Date Signed nature	Authorized Signer Printed Name	Pročessors Rep. Signature

^{*}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.

VISA DISCLOSURE PAGE
DocuSign Envelope ID: F78EC36D-5E58-484E-B7A3-14C03FC200AC

Member Bank (Acquirer) Information:

Acquirer Name: Synovus Bank

Acquirer Address: 1125 First Avenue, Columbus, GA 31901

(706) 649-4900 Acquirer Phone:

Important Member Bank (Acquirer) Responsabilities:

- 1. A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant.
- A Visa Member must be a principal (signatory) to the Merchant Agreement.
- The Visa Member is responsible for and must provide settlement funds to the Merchant.
- The Visa Member is responsible for all funds held in reserve that are derived from settlement. 4.
- 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.
- 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	
DocuSigned by:	2/8/2024
	Feb. 03, 2024
Merchant's Signature	Date
DUY LE	Owner
Merchant's Printed Name	Title