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: Impact Vaulted CP

Business Information						
DORIE'S INC				AZALEA CITY GRILL		
Merchant Legal Business Name				DBA Name		
2613 VENICE COURT				1000 GAILLARD DRIVE		
Mailing Address			-	DBA Address (Physical, N	o PO Boxes)	
MOBILE	Louisiana	36605		MOBILE		Alabama 36608
City	State	Zip		City		State Zip
2514474033				2514474033		
Legal Phone #	Legal Fax #		-	DBA Phone #	_	DBA Fax #
862396992	1 Ylyrs.	1 YI _{Mos.} New b	usiness New owner Season	al? 🗌 Yes 🔲 No List mont	ths	
Federal Tax ID # (Must be 9 digits)	Length O	wned	Business License	Date Opened:	01 feb 2023	
				·		
Merchant State registration		E-mail Address:	COURTNEY1971@GMAIL.COMeb	site Address:		
Any prior No	Yes If yes:	Personal Busi	ness If yes, how long			
Type of Sole Propr	ietorshin 🔲 I	I.C. Partnershin	Ltd Partnership Corp, check	one [.] Public Private	Non	Other
3,000						
Business Type						
Retail Restaurant Lodging	Service	Internet% 🔲 N	1ail% ☐ Tel	% Bus-to-Bus 9	6	
Description of Business						
Description of Business						
Detailed Description of Business (ir	ncluding produ	ucts/services; card cl	narging policies; delivery methods	s; whether own/finance inver	ntoryprovide	separate pages if needed):
RESTAURANT						
Mailing Address (sologt	gal DPA	Location Contact:	BILLY COURTNEY	Phone #		2514474033
Mailing Address (select Le	gai 🗌 DBA 🖺	Location Contact.		_ Priorie #	-	
Refund/Return Policy						
	_					
■ No refund ■ Refund in 30 days	or less 🔲 Me	rchandise	Other:			
A						
American Express Disclosure						
The "NICD" party listed throughout t	laia Amaliaatia	n and the Menchent	A	andrea Evance on will con-		Curan aa aalaa an waxa babalfi
The "NCR" party listed throughout t	нь Аррііса(10	n anu me Merchant i	Agreement is your acquirer for Ar	nencan Express, or will conv	rey American I	Exper ss sales on your behalf:
NCR Payment Solutions, LLC						
864 Spring Street, Atlanta, GA 3030	08					
DocuSigned by:						3/7/2024
Martha Dorie Court	ney					3,1,2027
XEFDD5BCF7E32486	1		MARTHA DORIE COU	RTNEY / OWNER		Feb. 28, 2024
Merchant Signature			Print Name/Title			Date:

PATRIOT ACT / Sit	e Survey											
		To help	the govern	ment fight	the fundir	ng of terrorism	ņ aņ	id money laundering	activities, the USA	Patriot Act requires	s all financial	institutions to
PATRIOT ACT REQ obtain, verify and red ask for your name, p license or other ident	ord information hysical addres:	n that ide s, date c	entifies eac of birth, taxp	n person (bayer ident	ncluding b ification nu	ousiness entit umber and ot	ties) her i	who opens an acco	allow us to identify	ns for you: When yo you. We may also a	ou open an a ask to see yo	ccount, we will ur driver's
license or other ident	tifying documer	nts. Con	nplete Secti	ons I and	I and III.	(*In Section	II, D	<u>river's License requ</u>	ired use other ID	only if no Driver's L	icense issue	d.)
Sec	tion 1:			An	plicable		-	Sect	ion II:		Applicable	
Business Forn	n of Identificat	tion		Items	Reviewed	eviewed:		Individual Form of Identification		It	Items Reviewed:	
			Busines	s Name:				ideliti	ilcation			
Govt Issued Busines	s License		Date an	d Place of			[Drivers License:	5580674	Name:		RTHA DORIE JRTNEY
Tax Return			13344110	<u>. </u>			5	State ID:		Date of Birth:		ul 1971
Corporate Resolution	า		ID/Tax I	D Number	86239	6992	F	Passport:		DL/ID#:	5580	0674
Entity Agencies								Military ID:		Date of Issuar	nce:	
Business financial St	tatement		Expiration	on Date:				Mexican Consulate D:		State of Issua	nce: Non	e
Partnership Agreeme	ent									Expiration:		24, 2027
			Type Fir	n'l S't			F	Resident Alien ID:		Address:	2613 COL	3 VENICE
Section III											000	<i>7</i> 1 (1
On site visit done	hy Sales Ren			Rusines	e Consista	ant with Annlie	catio	on (including any e-0	Commerce addendi	ime(e))		
			L			• • • • • • • • • • • • • • • • • • • •				. , ,		
Address of locatio	n inspected:		DBA Addre	ess	Legal Add	dress	URI	L listed in eCommer	ce addendum	Other Addres	SS:	
Does name posted at business match name on application Yes No Does inventory volume appear to be sufficient? Yes No												
Does location have appropriate business signage ☐ Yes ☐ No Are store hours posted? ☐ Yes ☐ No Number of employees:/td>												
	Did you view merchant's inventory? Yes No Get Samples? Yes No Did you get Interior/exterior photos? Yes No											
Was inventory consistent with merchant's type of business? Yes Comments:												
* Signature of Sales Representative: Date:												
* By signing above you hereby acknowledge that the information listed herein is true and accurate and was personally observed on the indicated document, and at the indicated address and (in the case of information listed below in the e-Commerce addendum(s)) indicated URL(s) as applicable.												
address and (in the d	case of informa	lion liste	d below in	the e-Con	merce au	dendum(s)) ir	naica	aled URL(S) as appi	icable.			
Principal Information	n .											
·	Title		Data of Div	41-	0	0/ - (T ime				Desidential (\ -1 -1	Residential
Principal's Name	Title		Date of Bir	un	Ownersh % / Years			Social Security # (Pro policy for collection a		Residential A		Phone #
					707 1000	Business		ecurity numbers can		(0.13), 0.1111	o, - .p)	
								www.securebancard.o				
MARTHA DORIE										2613 VENICE COU	RT, MOBILE,	
COURTNEY	OWNER				100/1 YEA	AR	***	***1481		AL, 36605		2514425521
Bank Information											ĺ	
Name of Financial Ins	stitution				nt number	<u></u>		Routing #	Phone #	Contact	Date Open	∌d
Trustmark Bank				******03	861			065300279				
				•	•			(defined below) is				
their agents. REQU		-		account	or the serv	rices contemp	piate	ed under this Agreer	nent. Said authority	ris granted to Merc	nani Banks	Jrocessor and
tricii agerits. NEQU	MILED. ATTACH	VOIDED	CHECK									
Please select one	for ACH acco	ount typ	e listed ab	ove:	Check	ing account		Savings account	Bank GL accoun	t		
						_		_				
Trade / Business R	eferences											
Trade Name		Acc	ount #		Pr	oduct Sold			Phone #' (No 8	00 #s)		
None		None							None None			
None		None							None None			
Other businesses	s in which mer	chant o	r a princip	al are nov	or previ	ously have b	een	n involved as owne	r/operator/directo	r:		

Processing Information		ca/MasterCard/Discover Cards			nd Business cards only	
	JCB**		☐ Mas	Credit Cards and Busi terCard Debit cards on Debit cards only Based Debit/EBT Card	ly	
Projected total annual sales \$ _		Electronic card-swiped transac	rtions	95 %	Projected avarage Visa/MC/DISC/Amex	ticket size 18 (
Projected Visa/MC/DISC/Amex Monthly \$15000.00 Annual \$_	Sales	Electronic key-entered (with in Electronic card not present (w. OR	nprints) /out imprints)	5 % None %	Do you use a 3rd pa	
Projected Visa/MC/DISC/Amex \$2000.00		Touch-tone card not present (Touch-tone card not present (Mail/Telephone Order (card not eCommerce (card not present	no imprints) ot present)	% % None	Contact name a Name: Phone:	·
		,	<i>)</i> OTAL (must equal 10		Priorie.	
		NOTE. IV	OTAL (must equal 10	J090J		
If applicable, provide: video (TV	V), audio tape (Ra	ply copy of print advertising, catalog dio or IVR), and Web-page screen p		S	o you bill your customer pr hipped? If yes, how many o 3-30 days 31-60 days	lays? 🔲 0-2 d
Do you authorize carrier to deli			_		over 90 days	
How do you advertise? Yello	ow pages 🗌 Telen	narketing Catalog Internet V	Word of mouth Pub	lications Mass/Direc	t mail 🗌 Other 🔙	
•		merchant, please provide most rece	p			
Actual chargeback volume for r	most recent 3 mor	hths \$	6 months \$			
# of locations?None	If you are affilia	ted with an existing account, please	provide existing mero			
# of locations?None	If you are affilia		provide existing mero		lder data:	
# of locations?None List the names of each of you	If you are affilia ur independent c	ted with an existing account, please	e provide existing merc	ave access to cardho	lder data:	
# of locations? None List the names of each of you Merchant Owns Leases Lo	If you are affilia ur independent c	ted with an existing account, please	provide existing mero	ave access to cardho	lder data:	
# of locations?None List the names of each of you	If you are affilia ur independent c ocation(s)? er/landlord:	ted with an existing account, please	e provide existing merc	ave access to cardho	lder data:	
# of locations? None List the names of each of you Merchant Owns Leases Locate Locate County Cou	If you are affilia ur independent c ocation(s)? er/landlord:	ted with an existing account, please	e provide existing merc	ave access to cardho	lder data:	
# of locations? None List the names of each of you Merchant Owns Leases Localized Leases Localized Council C	If you are affilia ur independent c ocation(s)? er/landlord:	ted with an existing account, please	e provide existing merc	ave access to cardho	lder data:	
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# of locations? None List the names of each of you Merchant Owns Leases Locate Contact Name/address of mortgage holder Other significant Merchant Contact American Express Existing Accounts:	If you are affilia ur independent concation(s)? er/landlord: acts with third parti	es: AXP volume is less than \$1MM ann	e provide existing mercet servicers that will he How long at curre	ent locations(s)?:		(P#forthis
# of locations? None List the names of each of you Merchant Owns Leases Local Name/address of mortgage holde Other significant Merchant Contact American Express Existing Accounts: If you currently accept AXP pay account. Existing AXP SE #:	If you are affilia ur independent conception of the conception of	es: AXP volume is less than \$1MM ann	e provide existing mercets servicers that will here. How long at current and a current servicers that will here.	ent locations(s)?:	√e will assign you a new A	KP # for this
# of locations?	If you are affilia ur independent concation(s)? er/landlord: locts with third particular	es: AXP volume is less than \$1MM annot \$1MM annot \$1MM annotally, please provide y	How long at curre	ent locations(s)?: It your existing AXP#. V	Ve will assign you a new Ait to AXP on your behalf.	
# of locations? None List the names of each of you Merchant Owns Leases Local Contents Other significant Merchant Contants Existing Accounts: If you currently accept AXP pay account. Existing AXP SE #: If you currently accept AXP pay New Accounts: If you do not currently accept AXP accepting AXP payments. AXP	If you are affiliatur independent concation(s)? er/landlord: lects with third particular yments, and your anyments in excess of the payments, any pa	es: AXP volume is less than \$1MM annot \$1MM annot \$1MM annotally, please provide y	How long at curre ually, you must submi our existing AXP#, so	ent locations(s)?: It your existing AXP#. V so we can convey this AXP, we will assign yo	Ve will assign you a new Ait to AXP on your behalf.	
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# of locations? None List the names of each of you Merchant Owns Leases Local Name/address of mortgage holde Other significant Merchant Contact American Express Existing Accounts: If you currently accept AXP pay account. Existing AXP SE #: If you currently accept AXP pay New Accounts: If you do not currently accept A accepting AXP payments. AXP If you do not currently have an In the event your volume excee offers or promotions of AXP pro	If you are affilia ur independent concation(s)? er/landlord: licts with third particular with third particula	es: AXP volume is less than \$1MM annot \$1MM annot your annual volume is less than \$1MM, annot your annual volume is less than \$1MM, annually, you may be moved direct from AXP via offline or on-line means as some time, consistent with application.	How long at curre How long at curre ually, you must submi our existing AXP#, so \$1MM, if you request we will contact AXP of	ent locations(s)?: It your existing AXP#. V so we can convey this AXP, we will assign you n your behalf. of AXP Offers and Prori	Ve will assign you a new Atto AXP on your behalf. u an AXP # for this account an account to the second to the sec	t, so you can s to receive futu

^{**} 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.

** Equipment Options		1	Drugha	D '	1005			Durchess	Manalan		
Model		٥	Purchase ty New		rchase furbished Rent		Rent	Purchase Other Source	Merchant Owned		Price
Terminal										\$	
Terminal										\$	
Printer										\$	
PIN Pad Imprinter			Purchase Only							Ф	
Other										\$	
										\$	
Shipping, handling and tax will be	hilled in ac	ldition to t	he equinment nrice liste	ed ahove							
Equipment Billing to:	omea m ac	idition to t	Merchant Agent								
Ship Equipment to: DBA Legal Agent		nt Othe	r:	•							
Send Welcome Kit to:											
Merchant training provided by:			Processor Agent	Other:							
SERVICE ACCEPTANCE AND F	EE SCHE	DULE									
Discount Rates Interchange Pa	ss Through	Discount F	Rate % Per Item	n \$	As:	sociation	Dues & Asse	essments Pass Through			
Rate 1	%	Per Item \$	Rate 2		9/	%	Per Item \$	Rate 3		%	Per Item \$
Visa Qual Credit	3.84	0.00	Visa Mid-Qual Credit					Visa Non-Qual Credit			
Master Card Qual Credit	3.84	0.00	Master Mid-Card Qual Cre	edit				Master Non-Card Qual Credit			
Discover Network - PayPal Qual Credit	3.84	0.00	Discover Netword - PayPa		edit			Discover Network - PayPal Non-	Qual Credit		
American Express Qual Credit	3.84	0.00	American Express Mid-Qu					American Express Non-Qual Cre			
Visa Qual Debit	3.84	0.00	Visa Mid-Qual Debit					Visa Non-Qual Debit			
Master Card Qual Debit	3.84	0.00	Master Card Mid-Qual Del	bit				Master Card Non-Qual Debit			
Discover Network - PayPal Qual Debit	3.84	0.00	Discover Network - PayPa		ebit			Discover Network - PayPal Non-	Qual Debit		
Pin Debit			EBT					Star		\$1 per mon	th
Rewards Pricing											
Visa Rewards (Discount Rate \$ 3.8 Amex Rewards (Discount Rate \$ 3.8		em <u>0.00</u> Item <u>0.00</u>					iscount Ra	te \$ 3.84 Per Item 0.00 Rate \$ 3.84 Per Item 0.0	00		
JCB Card %	Diners	s Carte Bl	anche%		American	n Expres	s Discount	rate%OR			
Monthly Flat Fee: \$		Monthly (Gross Pay 🔲 Daily	Gross Pa	ıy 🗌 Ret	tail \$	_Trans Fe	e + % OR 🗆			
Est. Annual Amex Volume: \$_	one		Est. A	verage Ar	nex Ticke	None t: \$	•				
AMEX Pay Frequency 3 c	lay	15 day						lled by American Expres	SS.		
Miscellaneous Fees:											
Monthly Statement Fee \$	Applica	tion/Setu	p Fee \$ ACH R	eject/Char	nge Fee \$	0.00	Online Me	erchant Portal \$ m	onthly		
Monthly Statement Fee \$ Chargeback/Retrieval Fee \$ 15.			p Fee \$ ACH R		nge Fee \$				onthly each		
	<u>00/12</u> . @ach	Monthly	p Fee \$ ACH R	Voice Au	th/ARU Fe	ee \$ None	ACH I		each		
Chargeback/Retrieval Fee \$ 15.	00/12 @ ach	Monthly	p Fee \$ ACH R	Voice Au	th/ARU Fe	ee \$ <u>None</u> kenizatio	0.0 On Fee \$	Batch Fee \$ 0.00 00 each Annual Fee \$ 0.00	each		
Chargeback/Retrieval Fee \$ 15. ACH Debit \$1.00 Upon Accour	00/12 @ ach	Monthly	p Fee \$ ACH Ro / Minimum: \$_0.00 e \$_0.00 each CVV2	Voice Au	th/ARU Fe	ee \$ <u>None</u> kenizatio	0.0 On Fee \$	Batch Fee \$ 0.00 00 each Annual Fee \$ 0.00	each		
Chargeback/Retrieval Fee \$\frac{15}{25}\$ ACH Debit \$1.00 Upon Accour ** Administrative Maintenance 0.00	00/12 @ ach	Monthly al AVS Fe	p Fee \$ ACH Ro / Minimum: \$_0.00 e \$_0.00 each CVV2	Voice Au	th/ARU Fe	ee \$ <u>None</u> kenizatio	ACH I 0.0 on Fee \$ ** Gatewa	Batch Fee \$ 0.00 00 each Annual Fee \$ 0.00	each		
Chargeback/Retrieval Fee \$\frac{15}{25}\$ ACH Debit \$1.00 Upon Accour ** Administrative Maintenance Monthly bill minimum: 0.00	00/12 @ach	Monthly al AVS Fe	p Fee \$ ACH Roy Minimum: \$_0.00 e \$each CVV2 hly ** PCI Non Compl	Voice Au Pree \$ iance Fee ** Other \$	th/ARU Fe each Tol	ee \$ None kenization monthly	ACH I On Fee \$ ** Gatewa e Description	Batch Fee \$ 0.00 each Annual Fee \$ 0.00 y Fee \$ 0.00 monthly	each		
Chargeback/Retrieval Fee \$ 15. ACH Debit \$1.00 Upon Accour ** Administrative Maintenance Monthly bill minimum: ** Other \$ None per Per None month	00/12 each Int Approv. Fee \$ Descrip	Monthly al AVS Fe	p Fee \$ ACH Roy Minimum: \$_0.00 e \$ each CVV2 thly ** PCI Non Compl	Voice Au Pree \$ iance Fee ** Other \$	th/ARU Fe each Tol	kenization monthly Non per Non mon	ACH I On Fee \$ ** Gatewa e Description	Batch Fee \$ 0.00 each Annual Fee \$ 0.00 y Fee \$ 0.00 monthly	each		

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.

Acre	hant	initia	10

eCommerce Application Addendum									
Number of e-Commerc	ce websites:		(If more than 1, complete, initial and attach an additional copy of this page for each additional website)						
Website URL:		Website server IP Address: N		Noi	пе	Website DBA:			
Customer Service: em	ail address:	BCOURTNEY1971@GMAIL.COM Te		Tel	ephone:	2514474033	List all links to other we	bsites:	
Web Hosting Service I	Name:	F		Add	dress:		Contact Telephone:		
Fullfillment House Na	me:	1		Add	dress:		Contact Telephone:		
How do you advertise	:				(Attach samples; e.g., catalog/print/broadcast/telemarketing script)				
Do you bill customer's Yes No	s card before ship	oping product	or performing service	e?	If Yes, how many days before?				
What is your return/refund policy?					Website Security Method:				
Digital Certificate Issu	er:				Digital Ce	rt No(s)/Exp Date(s)		Ov Shar	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 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 glive 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 BlN 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 no copies or facsimiles of other documents bearing Merchant's and Guarantor(s)'s si

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

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.

MERCHANT SIGNATURES		GUARANTOR SIGNATURES	
DocuSigned by:	3/7/2024	Profilered by	3/7/2024
X 1) Martha Dorie Courtney	Feb. 28, 2024	× 1) Martha Done Courtney	Feb. 28, 2024
Principal/Owner for Merchant	Date	Guarantor Signature (No Titles)	Date
MARTHA DORIE COURTNEY	OWNER	MARTHA DORIE COURTNEY	
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	

МС

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 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/withholding 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.secure

Section 1	: Merchant Application	Information (Must match	information in Merchant	Application): Date	Application Signe	ed (by Authorized S	igner named below):
Feb. 28.					11	. (.)	,

Merchant Legal Name: C C	MARTHA DORIE	− Merchant Federal Tax ID (as it appears on income tax returr	n): <u>None</u>	Merchant State of formation/Incorporation:
AL Merchant Address:	2613 VENICE COU	RT, MOBILE, AL, 36605		_ Merchant Entity Type
Corporation	<u> </u>			

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 MARTHA DORIE COURTNEY	Title OWNER			% of Legal Entity OwnerShip: 100 %		
Individual's Home (Street) Address (No P.O. Box) 2613 VENICE COURT	City, State, Zip MOBILE, AL, 36605			Date of birth 13 jul 1971		
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes □ No	(SSN)/Individual Taxpayer Ide	(SSN)/Individual Taxpayer Identification No. (ITIN): *****1481				
Id Type:* ■ Driver's License □ Other State photo ID showing residence □ Passport □ Resident Alien ID □ Other ID ±	State/Country of Issuance AL	Date Issued 26 aug 2023	Expiration Date 24 aug 2027	Number on ID: 5580674		
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	Control Prong?				
Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ±	State/Country of Issuance	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? ☐ Yes ☐ No	(SSN)/Individual Taxpayer Ide	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	1		% of Legal Entity OwnerShip: None %		
Individual's Home (Street) Address (No P.O. Box)	City, State, Zip MOBILE, ,			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. (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 MARTHA DORIE COURTNEY	Title OWNER			% of Legal Entity OwnerShip: 100 %		
Individual's Home (Street) Address (No P.O. Box) 2613 VENICE COURT	City, State, Zip MOBILE, AL, 36605			Date of birth 13 jul 1971		
Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes □ No	(SSN)/Individual Taxpayer Ide	entification 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 AL	Date Issued 26 aug 2023	Expiration Date 24 aug 2027	Number on ID: 5580674		

*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:

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.

Docusigned by: 3, Martha Doric Courtney EFDDSBCFTE32486 MARTHA DORIE CO	/7/2024 URTNEY	Martha Dorie Court	ne Docusigned by:	3/7/2024
Authorized Signer	Date Signed	Authorized Signer Printed Name	Processor's Rep.	Date Signed

Anna Bourgeois

Feb. 28, 2024

VISA DISCLOSURE PAGE
DocuSign Envelope ID: C93C6B24-615F-4F52-B57C-B81C55514588

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	
Martha Dovie Courtney	3/7/2024
EFDD5BCF7E32486	Feb. 28, 2024
Merchant's Signature	Date
MARTHA DORIE COURTNEY	OWNER
Merchant's Printed Name	Title