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

Dunings Information					
Business Information					
METAL CARPORT SALES LLC				METAL CARPORT SAL	ES LLC
Merchant Legal Business Name				DBA Name	
3601 NW EVANGELINE THWY				3601 NW EVANGELINE	
Mailing Address				DBA Address (Physical, N	
CARENCRO	Louisiana	70520		CARENCRO	Louisiana 70520
City	State 2	Zip		City	State Zip
8888231512				9859663831	
Legal Phone #	Legal Fax #			DBA Phone #	DBA Fax #
462951944	11 Yrs. 1		ousiness New owner	Seasonal? Yes No List mor	nths
Federal Tax ID # (Must be 9 digits)	Length Ov	/ned	Business License	Date Opened:	01 oct 2012
Marahant Stata registration		E mail Addraga: V	VHITEHUEY9@GMAIL.COM	Mob site Address:	
Merchant State registration		E-mail Address:	<u> </u>	Web site Address:	
Any prior No	Yes If yes:	Personal Busi	ness If yes, how long		
Type of Sole Prop	rietorship 🔳 LL	C Partnership	Ltd Partnership Corp	, check one: Public Private	Non Other
usiness Type					
escription of Business		_			
Description of Business Detailed Description of Business (in METAL CARPORTS AND STORAGE)	ncluding produc SE BUILDINGS	ets/services; card cl	harging policies; delivery	methods; whether own/finance inve	entoryprovide separate pages if neede
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METAL CARPORTS AND STORAGE Mailing Address (select Lea Refund/Return Policy No refund Refund in 30 days American Express Disclosure The "NCR" party listed throughout NCR Payment Solutions, LLC 864 Spring Street, Atlanta, GA 303 DocuSigned by:	or less Merce	Location Contact:	harging policies; delivery HUEY WHITE	methods; whether own/finance inve	9859663831 9859663831 nvey American Exper ss sales on your b
Detailed Description of Business (in METAL CARPORTS AND STORAGE Mailing Address (select Lefund/Return Policy No refund Refund in 30 days The "NCR" party listed throughout NCR Payment Solutions, LLC 864 Spring Street, Atlanta, GA 303	or less Merce	Location Contact:	harging policies; delivery HUEY WHITE	Phone # er for American Express, or will con	9859663831 9859663831 nvey American Exper ss sales on your b

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PATRIOT ACT / Site Survey

PATRIOT ACT / Site Survey

PATRIOT ACT REQUIREMENTS - 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, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. Complete Sections I and II and III. (*In Section II, Driver's License required -- use other ID only if no Driver's License issued.)

Section 1:

Applicable
Individual Form of Identification
Items Reviewed:

Individual Form of Identification
Items Reviewed:

Business	Section 1: Form of Identificat				Section II: Individual Form of Identification				Applicable Items Reviewed:				
			Business Na	ime:									
Govt Issued Bu	isiness License		Date and Pla Issuance:	ace of		I	Drivers License:		002943272		Name:	Н	UEY WHITE
Tax Return							State ID:				Date of Birth:	24	4 jun 1957
Corporate Reso	olution		ID/Tax ID No	umber: 4	62951944		Passport:				DL/ID#:	00	02943272
Entity Agencies	3						Military ID:				Date of Issuan	ce:	
Business financ	cial Statement		Expiration D	ate:			Mexican Consula ID:	ate			State of Issuar	nce: N	one
Partnership Ag	reement										Expiration:		un 24, 2023
			Type Fin'l S'	t			Resident Alien II	D:			Address:	1:	14 DELMAR LN
Section III													
On site visit	done by Sales Rep		☐ Bι	ısiness Con	sistent with A	Application	on (including any	/ e-Co	mmerce add	lendums(s))		
Address of lo	ocation inspected:		BA Address	Lega	l Address	UR	L listed in eCom	merce	addendum		Other Addres	s:	
Does name pos	sted at business mate	ch name	on application	Yes	No	Do	es inventory volu	ume a	ppear to be s	sufficient	? Yes No		
Does location h	ave appropriate busi	ness sigr	nage 🗌 Yes 📗	No		Are	e store hours pos	sted?	Yes Nes	o Numbe	r of employees:	/td>	
	erchant's inventory?			Samples?	Yes No	Did y	ou get Interior/e		r photos?	Yes 🔲 1	No		
Was inventory	consistent with merch	nant's typ	e of business	?			Comments:						
· ·	Sales Representative						Date:						
* By signing ab address and (in	ove you hereby ackn the case of informat	owledge ion listed	that the inform below in the e	nation listed e-Commerc	herein is true e addendum(e and ac (s)) indic	curate and was pated URL(s) as a	persor applica	nally observe able.	ed on the	indicated docur	nent, and	at the indicated
							• •						
Principal Infor	mation												
Principal's Name	Title	Date of	Birth	Ownership % / Years	% of Time Spent In Business	policy t	Security # (Proce for collection and y numbers can be ecurebancard.cor	l use o e foun	f social	R	esidential Addre (City, State, Zip		Residential Phone #
HUEY WHITE	OWNER			51/11 YRS		******59	009			114 DELI 70506	MAR LN, LAFAYE	TTE, LA,	9859663831
Bank Informat	ion												
Name of Financ				Account nur	mber		Routing #		Phone #	C	Contact	Date Ope	ened
HOME BANK	iai monaton		*	*****6602			265270303					Date op	
entries to the their agents.	ATION FOR AUTOM account identified re REQUIRED: ATTACH at one for ACH acco	lating to t	the above acc CHECK	ount for the	services con	itemplate	`	reeme	ent. Said auth	nority is g			
Trade / Busine	ess References												
Trade Name		Accou	ınt #		Product Se	old			Phone #' (No 800 #	s)		
None		None							None None				
None		None							None None	е			
Other busine	esses in which mer	chant or	a principal ar	re now or p	reviously ha	ve beer	n involved as ov	wner/c	operator/dir	ector:			

Sign Envelope ID: 4FD9831	1-D4A9-4008-862	2-7E700B66E7EC		HW Ds	Merchant initials	H W
Processing Information						
ard Types Accepted:	All Discove JCB** American I		Vis Ma	sterCard Credit Cards a Credit Cards and Bu sterCard Debit cards of a Debit cards only I Based Debit/EBT Ca	only	
Projected total annual sales \$	Sales	Electronic card-swiped transact Electronic key-entered (with imp Electronic card not present (w/o OR Touch-tone card not present (w Touch-tone card not present (no Mail/Telephone Order (card not	orints) out imprints) ith imprints) o imprints)	70% 30% None%		arty fulfillmen Yes f "yes" and phone nu
		eCommerce (card not present)		None%	Pnone:	
		NOTE: TO	TAL (must equal 1	100%)		
Do you authorize carrier to delive How do you advertise? Yellov Have you ever accepted credit c statements. If you are a MO/TO Actual chargeback volume for m # of locations? None List the names of each of your	w pages Telemarket cards before? Yes or e-Commerce mercon nost recent 3 months s	eting Catalog Internet W No If Yes: Processor Name chant, please provide most recent 6 with an existing account, please provide most please provide most recent for the provide most recent for the please provide most recent	nt 6 months of proce months \$ provide existing me	(Please provide essing statements.)	the most recent 3 months o	·
			T., , .			
Merchant Owns Leases Loc lame/address of mortgage holder			How long at curi	ent locations(s)?:		
Other significant Merchant Contact						
American Express Existing Accounts:	ments, and your AXP	volume is less than \$1MM annu	ally you must subn	nit your existing AXP#.	We will assign you a new A	VP# for this
account. Existing AXP SE #:			any, you made out.			ou # ioi uiis
				o so we can convey th	is to AXP on your behalf.	701 # 101 till3
account. Existing AXP SE #:	ments in excess of \$1 XP # payments, and y	.MM annually, please provide you	ur existing AXP#, s	·	ŕ	
account. Existing AXP SE #: If you currently accept AXP payr New Accounts: If you do not currently accept AX	ments in excess of \$1 XP # payments, and y SE #:	.MM annually, please provide you rour annual volume is less than \$	ur existing AXP#, s	st AXP, we will assign	ŕ	
account. Existing AXP SE #: If you currently accept AXP payr New Accounts: If you do not currently accept AX accepting AXP payments. AXP \$	MENT AND THE REPORT OF T	MM annually, please provide your annual volume is less than \$ al volume is more than \$1MM, wannually, you may be moved dirent AXP via offline or on-line mean	ur existing AXP#, s S1MM, if you reques we will contact AXP ctly to AXP. Opt ou ss (such as tradition	on your behalf. t of AXP Offers and Pral mail and telephone)	you an AXP # for this accou omotions: If you do not wisl , please contact customer s	int, so you can n to receive futi
account. Existing AXP SE #: If you currently accept AXP payr New Accounts: If you do not currently accept AX accepting AXP payments. AXP S If you do not currently have an AIII the event your volume exceed offers or promotions of AXP process.	Ments in excess of \$1 XP # payments, and y SE #: AXP #, and your annu ds more than \$1MM a ducts or services from the that it may take son	MM annually, please provide your annual volume is less than \$ al volume is more than \$1MM, wannually, you may be moved direct an AXP via offline or on-line mean the time, consistent with applicable	ur existing AXP#, s S1MM, if you reques we will contact AXP ctly to AXP. Opt ou ss (such as tradition	on your behalf. t of AXP Offers and Pral mail and telephone)	you an AXP # for this accou omotions: If you do not wisl , please contact customer s	int, so you can n to receive futi

^{**} 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.

Authorization Fees: \$

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						FEE S	CHEDULE											
** Equipment Options																		
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Model Terminal			Qty	New		кети	rbished		Rent	1	Oth	ier	Source	Own	ea		\$	Price
Terminal												Н		1			\$	
Printer																	\$	
PIN Pad																	\$	
Imprinter				Purc	nase Only													
Other						-						Н		1	_		\$	
		<u> </u>															\$	
Shipping, handling and tax will be	billed in a	ddition to	the ea	uipme	nt price listed	above.												
Equipment Billing to:					Agent C													
Ship Equipment to:			DB/	A 🗌 L	egal 🔲 Agent	Othe	er:											
Send Welcome Kit to:					egal Agent													
Merchant training provided by:			Pro	cesso	Agent	Other:												
SERVICE ACCEPTANCE AND F	EE SCHE	FDIJLE																
SERVICE ACCEPTANCE AND T	LL SOIIL	DOLL																
Discount Rates Interchange Pa	ass Throug	h Discour	t Rate		% Per Item \$		Asso	ociation	Dues &	Asses	smen	ts P	ass Through					
3		_																
Rate 1	%	Per Item	\$ Ra	ite 2			%		Per Iter	m\$ F	Rate 3					%		Per Item \$
Visa Qual Credit	3.84	0.00	Vis	a Mid-Q	ual Credit					١	Visa N	on-Ç	Qual Credit					
Master Card Qual Credit	3.84	0.00	Ma	ster Mid	Card Qual Credit					1	Master	Nor	n-Card Qual Credit					
Discover Network - PayPal Qual Credit	3.84	0.00	Dis	scover N	etword - PayPal M	id-Qual C	redit			1	Discov	er N	etwork - PayPal Non-Q	ual Cred	iit			
American Express Qual Credit	3.84	0.00	Am	nerican E	xpress Mid-Qual (Credit				,	Americ	an E	Express Non-Qual Credi	it				
Visa Qual Debit	3.84	0.00	Vis	a Mid-Q	ual Debit					١	Visa N	on-Ç	Qual Debit					
Master Card Qual Debit	3.84	0.00	Ма	ster Car	d Mid-Qual Debit								rd Non-Qual Debit					
Discover Network - PayPal Qual Debit	3.84	0.00			etwork - PayPal M	id-Oual D	ebit						letwork - PayPal Non-Q	ual Debi	t	+		
Pin Debit			EB								Star					\$1 per mo	nnth	
T III Debit											Jiui					Ψ1 pci iiic) I ICI I	
Rewards Pricing																		
Visa Rewards (Discount Rate \$ 3.8	Per I	Item 0.00					MC World C	Card (E	Discoun	t Rate	\$ 3.8	4	Per Item 0.00					
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Amex Rewards (Discount Rate \$	Per	r Item 0.0					Discover Re	ewards	(Disco	ount R	ate \$	0.0	Per Item 0.00					
Non-Bankcard Types Accepted																		
Ten Bambara Typec Heespiea																		
JCB Card %	Diner	rs Carte I	Blanch	e%			American E	Expres	s Disc	ount i	rate%	6	OR					
					_		_						_					
Monthly Flat Fee: \$		Monthly	Gross	Pay	Daily G	ross Pa	ay 🔲 Reta	il \$	Tran	ıs Fee	+	_ %	o OR 🔲					
Fot Annual Amov Valuma 6	lone				Fot Avo	A	may Tiakatı	None	е									
Est. Annual Amex Volume: \$_					ESI. AVE	rage A	mex Ticket:	Φ										
AMEX Pay Frequency 3	day	15 da	ay	30	day Amex F	ees di	sclosed in t	his se	ction a	re bill	ed b	v A	merican Express	3				
, ,	,												•					
Miscellaneous Fees:																		
Monthly Statement Fee \$ 0.00	Annlica	ation/Se	tun Fee	_ 0.00 - \$	ACH Reje	ct/Cha	nge Fee \$	00	Onlin	e Mer	chan	t P	ortal \$ 0.00 mg	nthly				
monthly Guatement 1 cc ¢	пррпо	2011/00	up i cc	Ψ		.00,0110	inge i ee ¢		O		oa.		01141 \$ 1110					
Chargeback/Retrieval Fee \$ 15	00/12 @nol	h Monti	alv Min	imum	¢ 0.00 V	oico Aı	ıth/ABI I Eoo	• None		CU D	atoh	E	o ¢ 0 00	_each				
Chargeback/Retrieval Fee \$	eaci	i WOIL	ily iviili	IIIIuiii	Φ_0.00	OICE AL	IIII/ARO FEE	ф <u>опе</u>	^	СПБ	atti	гес	5 A 0.00	_eacii				
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							0.00					n	00					
** Administrative Maintenance	Fee \$	mo	nthly *	* PCI I	lon Complia	nce Fee	9 \$m	onthly	/ ** Gat	teway	Fee	\$ <u> </u>	monthly					
** Other \$ per	Descrip	ntion			**	Other :	None	Non er	ie _	escri	ntion							
	_ Descrip	JUOH				Julei :	ψ þ	CI		,escri	ption	'						
Early Termination Feet \$	** D(al month	ılı Eos	0.00														

0.00 0.00 MasterCard \$_____ Visa \$____

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.

-DS	Merchant initials	Н
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eCommerce Application	n Addendum								
Number of e-Commerc	ce websites:		(If more than 1, co	omplete, ii	nitial and	attach an additional co	py of this page for each ac	dditional website)	
Website URL:		Website serv	ver IP Address:	None	None Website DB/				
Customer Service: em	ail address:	WHITEHUEY	9@GMAIL.COM	Telepho	ne:	8888231512	List all links to other w	vebsites:	
Web Hosting Service	Name:			Addres	s:		Contact Telephone:		
Fullfillment House Na	me:			Addres	s:		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	pping product	or performing se	ervice?	If Yes, how many days before?				
What is your return/re	fund policy?				Websit	e Security Method:			
Digital Certificate Issu	er:				Digital	Cert No(s)/Exp Date((s)	Ov Share	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 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 on copies or facsimiles of other documents bearing Merchant's and Guarantor(s)'s sig

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:	2/2//2023	DocuSigned by:	2/27/2023
X Huey White	Feb. 27, 2023	X 1 Huey White	Feb. 27, 2023
Principal/Owner for Merchant	Date	Guarantor Signature (No Titles)	Date
HUEY WHITE	OWNER	HUEY WHITE	
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

Merchant initials

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 forms included therein or prescribed form of Merchant Application including any other Patriot Act/customer identification and taxpayer identification forms included therein or prescribed form of Merchant Application including any other Patriot Act/customer identification forms and taxpayer identification forms included therein or prescribed form of Merchant Application including any other Patriot Act/customer identification forms and taxpayer identification forms included therein or prescribed forms of Merchant Application including any other Patriot Act/customer identification forms and taxpayer identification forms and taxpayer identification forms and taxpayer identification forms and taxpayer identifi

Section 1: Merchant Ap Feb. 27, 2023	plication Information	(Must match information in Merchant Application); Date Application Signature	gned (by Authorized Signer named below):
Merchant Legal Name:	HUEY WHITE	Merchant Federal Tax ID (as it appears on income tax return): None	Merchant State of formation/Incorporation:
LA Merchant Address:	114 DELMAR LN, L	AFAYETTE, LA, 70506	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 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 HUEY WHITE	Title OWNER			% of Legal Entity OwnerShip: 51 %
Individual's Home (Street) Address (No P.O. Box) 114 DELMAR LN	City, State, Zip LAFAYETTE, LA, 70506			Date of birth 24 jun 1957
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 12 jan 2018	Expiration Date 24 jun 2023	Number on ID: 002943272
Beneficial Owner Legal Name	Title		1	% 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	•	-	% 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	•	-	% 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 HUEY WHITE	Title OWNER			% of Legal Entity OwnerShip: 51 %
Individual's Home (Street) Address (No P.O. Box) 114 DELMAR LN	City, State, Zip LAFAYETTE, LA, 70506			Date of birth 24 jun 1957
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 12 jan 2018	Expiration Date 24 jun 2023	Number on ID: 002943272

Certifications and Signatures:

Cerifications 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: Huey White	2/27/2023	Huey White		
	Feb. 27,	3D6CDD05F89D48C HUEY WHITE			DocuSigned by: Anna Bourfeais	2/27/2023
Anna Bourgeois	2023	Authorized Signer Signature	Date Signed	Authorized Signer Printed Name	Processor's Rep. Signature	Date Signed

^{*}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: 4FD98311-D4A9-4008-8622-7E700B66E7EC

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: Huey White	2/27/2023
3D6CDD05F69D48C	Feb. 27, 2023
Merchant's Signature	Date
HUEY WHITE	OWNER
Merchant's Printed Name	Title