AFFIDAVIT FORM

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby declare under penalty of perjury, pursuant to the laws of State of Florida, that the following information provided by me is true, accurate, and complete to the best of my knowledge and belief. I understand that this affidavit is being executed for the purpose of customer identification, source of funds verification, and compliance with Know Your Customer (KYC) and Anti-Money Laundering (AML) requirements.

1. Personal Information:

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax Payer ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residential Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cryptocurrency Wallet Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Identification Documents:

Type of Identification Document: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Identification Document Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Issuing Authority: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Source of Funds:

Please provide detailed information regarding the source of the funds being utilized in the financial transaction(s) with PRESSPAGE ENTERTAINMENT INC dba REDEECASH. Include information on the origin, nature, and legitimacy of the funds.

4. KYC and AML Compliance:

a. I acknowledge that I have received, read, and understood PRESSPAGE ENTERTAINMENT INC dba REDEECASH policies and procedures related to KYC and AML compliance.

b. I confirm that the information provided herein is accurate, and I will promptly notify PRESSPAGE ENTERTAINMENT INC dba REDEECASH of any material changes to the provided information.

c. I agree to cooperate with any further verification or documentation requests made by PRESSPAGE ENTERTAINMENT INC dba REDEECASH for the purpose of compliance with KYC and AML regulations.

d. I understand that PRESSPAGE ENTERTAINMENT INC dba REDEECASH may be required to report any suspicious activities, as defined by applicable laws and regulations, to the appropriate authorities, and I will not hold PRESSPAGE ENTERTAINMENT INC dba REDEECASH liable for any such reporting.

5. I am the legal and beneficial owner of the wallet address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, associated with the cryptocurrency account used with REDEECASH EXCHANGE.

6. I hereby authorize PRESSPAGE ENTERTAINMENT INC dba REDEECASH to collect, store, and process my personal information and any additional information necessary to comply with KYC and AML regulations, including but not limited to my name, address, date of birth, government-issued identification documents, and any other relevant information.

7. I agree to cooperate fully with PRESSPAGE ENTERTAINMENT INC dba REDEECASH and provide any additional information or documentation that may be requested for the purpose of verifying my identity, conducting due diligence, and ensuring compliance with KYC and AML regulations.

8. I understand that failure to provide accurate and complete information, or any attempt to mislead or provide false information, may result in the termination of my account and may also lead to legal consequences, including but not limited to civil and criminal liabilities.

9. I acknowledge that PRESSPAGE ENTERTAINMENT INC dba REDEECASH reserves the right to refuse service, freeze or suspend my account, and report any suspicious activities or transactions to the relevant authorities, as required by law.

Confession of Judgment Provision:

10. In the event of any breach of my obligations under this affidavit, including but not limited to providing false or misleading information, I agree to irrevocably and unconditionally consent to the entry of judgment against me by any court of competent jurisdiction. I acknowledge that this provision allows PRESSPAGE ENTERTAINMENT INC dba REDEECASH to obtain a judgment against me without the need for any further notice or legal proceedings.

11. I waive any and all rights to a trial, notice, and opportunity to be heard before a judgment is entered against me. I agree that any judgment entered against me pursuant to this provision may be enforced against me immediately and without delay.

12. I understand that the confession of judgment provision is a material part of this affidavit and that PRESSPAGE ENTERTAINMENT INC dba REDEECASH may rely on it to protect its interests in the event of any breach of my obligations.

13. I understand and acknowledge that all trading transactions conducted through my cryptocurrency wallet address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on PRESSPAGE ENTERTAINMENT INC dba REDEECASH are considered public domain and can be traced and identified by my wallet address.

14. I further acknowledge that the trading transactions conducted through my wallet address may be visible to other users of the cryptocurrency network and can be accessed through public blockchain explorers or similar tools.

15. I agree that PRESSPAGE ENTERTAINMENT INC dba REDEECASH may disclose my wallet address and associated trading transactions to comply with legal or regulatory requirements, including but not limited to responding to inquiries from law enforcement agencies or regulatory authorities.

16. I understand that the transparency of trading transactions and the public identification of my wallet address is an inherent characteristic of cryptocurrencies and blockchain technology, and I assume full responsibility for any consequences resulting from the public disclosure of my trading activities.

I declare that the information provided in this affidavit is true and correct to the best of my knowledge, and I understand the legal consequences of providing false or misleading information.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Notary Seal

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Notary's Name]

Notary Public

[Notary's Commission Expiration Date]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Notary's Jurisdiction/State]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Seal: [Place the notary seal here]

Remit to: PRESSPAGE ENTERTAINMENT INC dba REDEECASH

PO BOX 142814

GAINESVILLE, FL 32614-1428