

BUSINESS INFORMATION (All fields marked with * are required)			
* Business Legal Name: MKL LLC		DBA:	
* Entity Type: LLC	* Business Start Date: 1	L/1/2022	* Federal Tax-ID: 34-4977997
* eMail:	* Phone:		Fax:
*Address: 29015 Three Notch Rd		Suite/Floor:	
* City: Mechanicsville	* State: Maryland		* Zip: 20659
OWNER INFORMATION (All fields marked with * are required)			
* Primary Owner Name: Michaela Lewis			* Estimated FICO Score: 650
* SSN: 216-53-3258	* Date of Birth: 09/28/1998		* Ownership %: 100
* Mobile Phone:	* Personal eMail:		Personal Fax:
* Address: 4824 Avondale Rd	Suite/Floor:		
* City: Hyattsville	* State: Maryland	•	* Zip: 20782
FUNDING INFORMATION (All fields marked with * are required)			
* Business Description: Rent cars to Uber/Lyft and delivery drivers			
* Purpose of Funds: Expansion			
* Annual Business Revenue: \$ 600000		* Requested Funding Amount: \$ 100000	
* Average Monthly Credit Card Volume: 10000		* Outstanding Receivables: \$ 0	
By signing below, each of the above-listed Business Owner(s)/Officer(s)/Principal(s) and Business (individually and collectively, "You") certify that all information and documents submitted in			
connection with this Funding Application ("Application") are accurate, true, correct, and complete; and that You will immediately notify the funding provider or any of its representatives			
successors, assigns, designees, agents, partners, or affiliates ("Recipients") of any change in such information or financial condition. You acknowledge that any false statements may be			
considered fraud. You acknowledge that the Recipients are relying on the information You provide. You further authorize the funding provider and each of the Recipients that may be involved			
with or acquire commercial loans having daily repayment features or purchases of future receivables, including Merchant Cash Advance transactions (collectively, "Transactions"), to obtain			
consumer or personal, business, and investigative reports and other information about You, including, but not limited to, credit card processor statements and bank statements, from one of			
more consumer reporting agencies, such as TransUnion, Experian, and Equifax, and from other credit bureaus, banks, financial institutions, creditors, and other third parties. You authorize the			
Recipients to receive relevant information regarding the commercial lease for the above-referenced premises from any leasing company and/or agent. You also authorize the funding provider to			
transmit this Application, along with any of the foregoing information obtained in connection with this Application, to any or all of the Recipients for the foregoing purposes. A photocopy of the			
Application will be deemed acceptable for the release of credit and/or investigatory information. Signed by:			
* Signature of Primary Owner: Miduals	Liwis	* Date: 2/	3/2025

Attach last 4 months of business bank statements

