

DBA Name		The kitchen ard	hive		egal Name	Will and pops		
Type of Business		Commisaary kitchen			ax ID	273811542		LLC
•		2161 s wilmington st raleigh nc 27603				273011312		LLC
Full Billing Address	.33	ZIOI 5 Willingto	on strateign ne	27003				
Phone at Location		(919) 943-7074	 [Best Phone (919)) 943-7074		
Business Email		Contact@thekithenarchivenc.com			Website	Thekitchenarchivenc.com		
Years In Business	_		Average Tick			Gross Annual Sales		
		- d	_					
Do you currently h			No Wi	ith who? _			Balance	
Current Credit Card Processor				Average	Processing Volume			
Last Month Vol.		#of Ti	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tio	ckets		4th Month Vol.		#of Tickets	
Owner #1 Name	William P	ettis		Title	Owner			
Date of Birth	08-25-19	86		SSN 244-49-27		64		
Full Home Address	301 fayetteville st raleigh nc 27601							
Home Phone	(919) 943	3-7074 Cell	Phone (919) 943-7	074 Email	willpettis86@	gmail.com	
Own/Rent	\$ <u>0 Own</u>	Yea	ars There 9	D	rivers Lience # 2	7677764 Sta	ate <u>Nc</u>	_
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	ars There	D	rivers Lience #	Sta		_
Business Home Bas	sed?	No Locatio	n: Lease/Own	Leased	Lease Terr	n	Monthly Rent	
Landlord / Mortgag	e Co. P	BG managament	:		 Conta			
Contact Phone	_		Cell			Email		
Bank Name/Branch	Bb&t		Contact			Phone		
Trade Reference#1			— Contact			 Phone		
Trade Reference#2			— Contact			 Phone		
Trade Reference#3			— Contact			Phone		
I hereby represent that all		formation is true and	_	ing false sta	tements might be cons		the above information, the	e applicant(s)

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/our financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/We authorize Money Works Direct, Inc. to receive pertinet information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/we authorize you to update my/our credit profile from time to time in the future, as you deem appropriate. By signing below, each of the aboe listed business and business ownet/officer (individually and collectiverly, "you") authorize Money Works Direct and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transcation, including without limitation the application therefor (collectively, "Transcation") to obtain consumer or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize Money Works Direct to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	William Pettis	Date	02/26/2018