MoneyWorks >	DIFFECT ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Carl
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DDA News		LIIV			ral Nama	LUX resale in		
DBA Name		LUX			gal Name		C	
Type of Business		retail		Ia:	x ID	815416310		Corp
Full Business Addre	!SS	3535 us hwy 17						
Full Billing Address								
Phone at Location		(904) 644-8769		B	est Phone (904)	644-8769	Fax	
Business Email		luxresalejax@y	ahoo.com		Website			
Years In Business		1	Average Tick	et		Gross Annual	Sales <u>120,000.00</u>	
Do you currently h	ave cash	advance?	No Wi	ith who?			Balance	
Current Credit Card	d Processo	or			Average F	Processing Vol	ume	
Last Month Vol.		#of Tic	kets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tic	kets		4th Month Vol.		#of Tickets	
	- · ·			- ***				
Owner #1 Name	Erica bur			Title	owner	2		
Date of Birth	0227198			SSN	589-21-848	3		
Full Home Address		athered pine crt	Dlama		F	luumaa	alaiau Ovalaa aana	
Home Phone	(904) 644		Phone		Email	-	alejax@yahoo.com	
Own/Rent	\$ <u>0 Ren</u>	Yea	rs There 2	Dri	ivers Lience # <u>b6</u>	20215875670	State FL	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address					-			
Home Phone		Cell	Phone		Email			
Own/Rent	\$	 Yea	rs There	Dri	ivers Lience #		State	
Business Home Bas	sed?	No Locatio	n: Lease/Own	Leased	Lease Term		Monthly Rent	
Landlord / Mortgage	e Co. <u>s</u>	mith & young			Contac	t	904-644-8769	
Contact Phone	_		Cell			_ Email		
Bank Name/Branch	vystar (credit union	Contact	vystar cr	edit union	Phone	(904) 777-6000	
Trade Reference#1			 Contact	_		Phone		
Trade Reference#2			— Contact			- Phone		
Trade Reference#3			— Contact			- Phone		
I hereby represent that all	the above in	nformation is true and u	 Inderstand that mak	ring false state	ements might be consi	- dered fraud. By pr	roviding the above information,	the 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	Erica burks	Date	02/14/2017