

DBA Name	Distro	bbeauty LLC	Legal Name	Distrobeauty LLC	
Type of Business	whole		 Tax ID	474786655	LLC
Full Business Addre		38TH STREET, RM 506,			
Full Billing Address	<u> </u>				
Phone at Location	(917)	388-2162	Best Phone (310	O) 428-9901 Fax	
Business Email	sales	@distrobeauty.com	 Website	www.distrobeauty.com	
Years In Business	1	Average Tid		Gross Annual Sales 180,0	00.00
Do you currently ha	ave cash advanc	e? Yes \	With who? BizFi	Balance 1	0985
Current Credit Card	d Processor		Average	Processing Volume	
Last Month Vol.		#of Tickets	 2nd Month Vol.	#of Tickets	
3rd Month Vol.		#of Tickets	4th Month Vol.	#of Tickets	
Owner #1 Name	Jure Klepic		Title Director		
Date of Birth	05061977		SSN 708-70-3	052	
Full Home Address	561 10TH AVE 15	B NEW YORK, NY, 10036			
Home Phone	(310) 428-9901	Cell Phone	Email	sales@distrobeauty.com	
Own/Rent	\$ 0 Rent	Years There 3	Drivers Lience #	170441857 State N	EW YORK
O #2 No			Tible		
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address Home Phone		Cell Phone	 Email		
Own/Rent	\$	Years There	Drivers Lience #	State	
Ownyntent	Ψ				
Business Home Bas	ed? No	Location: Lease/Own	<u>Leased</u> <u>Lease Ter</u>	rmMonthly Re	nt
Landlord / Mortgage	e Co		Cont	act	
Contact Phone		Ce	II	Email	
Bank Name/Branch		Contact		Phone	
Trade Reference#1		Contact		Phone	
Trade Reference#2		Contact		Phone	
Trade Reference#3		 Contact		Phone	
I hereby represent that all	the above information	n is true and understand that m	aking false statements might be co	nsidered fraud. By providing the above inf	ormation, 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 Jure Klepio	c Date	10/19/2016
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