DBA Name DssInc			Legal Name		Dissolvo I	nc.						
Type of Business		Pornpgraphy producer			Tax ID		3				LLC	
Full Business Addre	ess	1111 Ba	allsack Dr									
Full Billing Address												
Phone at Location (666) 666-6666				Best Phone (666) 6			666-6666	_	Fax	(666)	666-6667	
Business Email		Shooti	nropes@d	issolveinc.com	<u>m</u>	W	ebsite	Redtube.d	com			
Years In Business		10		Average Tic	ket _			Gross Ann	ual Sale	es	200,000.0	0
Do you currently h	ave casł	n advance	e?	No	١	With w	ho?				Balance	0
Current Credit Card	d Proces	sor		Ballsonchin	Inc	_	Average l	Processing '	Volume	9	200	
Last Month Vol.	0		#of Tick	cets		2nd	Month Vol.	0		#of 7	Tickets	
3rd Month Vol.	0		#of Tick	cets		4th	Month Vol.	0		#of 7	Γickets	
Owner #1 Name	Ash Will	iams			Titl	e	President					
Date of Birth	1980-10)-08			ISS	N	666-18-66	66				
Full Home Address	111 sou	th st										
Home Phone	(666) 66	56-6666	Cell F	Phone	(666) 666-	-6666	Email	bla	blabla@	gmail.d	com	
Own/Rent	\$ 0 Ov	/n	Year	s There	!	Drivers	Lience # 5			State	Florida	a
Owner #2 Name					Titl	۵						
Date of Birth	0000-00	0-00			122							
Full Home Address					55.	-						
Home Phone			Cell F	Phone			Email					
Own/Rent	\$		Year	s There		Drivers	Lience #			State		
Business Home Bas	ed?	No	Location	: Lease/Own	Lease	d	Lease Tern	Ten n thous years		Mont	hly Rent	1.00
Landlord / Mortgage	e Co.	Private					Conta	ct	No	neya		
Contact Phone		(777) 77	7-7777	_ Cell	<u>(</u>	(777) 7	777-7777	_ Er	nail	70	@7.ck	
Bank Name/Branch				Contact				Phone				
Trade Reference#1				_ Contact				– Phone				
Trade Reference#2				– Contact				– Phone				
Trade Reference#3				– Contact		_		– Phone		_		
I horoby represent that all	the shows	information	is true and ur	nderstand that ma	king falso st	atomoni	ts might be sens	idered fraud. F	ov providi	na tha a	hava informat	tion 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	Joe Dissolvo	Date	06/07/2016
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