

DBA Name		Adaptive	Computing Ente	rprises, Inc.	Lega	al Name	Adaptive Comp	uting Enterprise	s, Inc.
Type of Business		software			Tax ID		01-0568890		Corp
Full Business Addre	ess	1712 East	Bay Blvd., Suite	300, Provo,	Jtah	84606			
Full Billing Address									
Phone at Location		(801) 71	7-3417		Bes	st Phone <u>(239)</u>	298-0199	Fax	
Business Email						Website	www.adaptiveco	omputing.com	
Years In Business		16	Average	e Ticket			Gross Annual Sa	les <u>10,000,</u>	00.00
Do you currently h	ave cash a	advance?	No	With who	?			Balance	
Current Credit Card	d Processo	or				Average I	Processing Volum	ne	
Last Month Vol.	-		#of Tickets		. 2	nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tickets		. 4	th Month Vol.		#of Tickets	
Owner #1 Name	Arthur All	en		Ti	tle	President			
Date of Birth	08031946	5		 S:	SN	281-40-491	17		
Full Home Address	595 Rega	tta Road, Na	aples, FL 34103						
Home Phone	(239) 298	-0199	Cell Phone	(239) 298	3-019	9 Email	art.allen@	alanaples.com	
Own/Rent	\$ 0 Own	_	Years There	2	_Driv	ers Lience # A4	50-052-46-283-0	State Flor	rida
Owner #2 Name				Ti	tle				
Date of Birth				S:	SN				
Full Home Address			0 11 51						
Home Phone			Cell Phone			Email		_	
Own/Rent	\$		Years There		_Driv	ers Lience #		State	
Business Home Bas	sed?	No L	Location: Lease/C	Own <u>Leas</u>	ed	Lease Term	າ	Monthly Rent	26,519.00
Landlord / Mortgage	e Co. <u>N</u>	ewmark G	rubb Acres			Contac	ct _		
Contact Phone	_			Cell			_ Email		
Bank Name/Branch			Cont	act			Phone		
Trade Reference#1			Cont	act			Phone		
Trade Reference#2			Cont	act			Phone		
Trade Reference#3			Cont	act			Phone		
I hereby represent that all	the above in	formation is t	rue and understand th	nat making false	staten	nents might be cons	idered fraud. By provid	ding the above inforr	nation, 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 N	lame Arthur Aller	n Date	04/12/2017
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