

DBA Name	ame Royalty auto experts			Legal Name		royalty auto experts		
Type of Business		omotive repair		Tax ID		83-3085069		Corp
Full Business Addre	ss <u>263</u> 2	2 n las vegas blvd	n					
Full Billing Address								
Phone at Location	<u>(70</u>	2) 399-6292		Best	Phone <u>(702)</u>	684-9845	Fax <u>(</u>	702) 920-8868
Business Email	roy	royaltyautoexperts@gmail.c			om Website		Royaltyautoexperts.com	
Years In Business	1	Ave	rage Ticket			Gross Annual S	Sales <u>600,0</u>	00.00
Do you currently ha	ave cash adva	nce? No	With	who?			Balance _	
Current Credit Card	d Processor	_			Average I	Processing Volu	ıme	
Last Month Vol.		#of Tickets		2nd	l Month Vol.		#of Tickets	
3rd Month Vol.		#of Tickets		4th	Month Vol.		#of Tickets	S
Owner #1 Name	rodolfo martine	2Z		Title	owner			
Date of Birth	11231981			SSN	roy-85-243	4		
Full Home Address	2701 n rainbov	v blvd #1056						
Home Phone	(702) 399-6292	2 Cell Phone	(702	2) 684-9845	Email	rudyma	rtinez998@yahoo	o.com
Own/Rent	\$ 0 Rent	Years The	re 6 years	Driver	 s Lience # <u>17</u>	01956490	Stater	nevada
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address Home Phone		Cell Phone			Email			
Own/Rent	\$	Years The		Driver	S Lience #		State	
OWN/Rent	Ψ			Briver				
Business Home Bas	ed? No	Location: Lea	se/Own <u>l</u>	Leased	Lease Term	15 years	Monthly Re	ent <u>5,200.00</u>
Landlord / Mortgage	e Co. <u>royal</u> a	auto Ip			Conta	ct	Ben	
Contact Phone	(702)	471-1118	Cell	(702)	604-3928	Email	obm2@	msn.com
Bank Name/Branch	bank of ame	rica (	Contact n	ancy borro	el	Phone	(702) 935-567	6
Trade Reference#1	Pep boys	(	Contact D	ave		_ Phone	(702) 399-316	4
Trade Reference#2	Oriellys auto	narts (	Contact S	teven		– Phone	(702) 644-099	6
	Officiny 5 date	parts						
Trade Reference#3			_	ric		– Phone	(702) 644-800	0

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	rodolfo martinez	Date	10/25/2019
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