

DBA Name		REINV78		Le	gal Name	REINV78 GF	ROUP LLC	
Type of Business		PROPERTY BUSINESS		Tax ID		83-4076949		Corp
Full Business Addre	SS	20900 NE 30TH	AVE SUITE 101	.0				
Full Billing Address								
Phone at Location			2	В	est Phone (954)	865-8122	Fax	
Business Email	REINV78@GMA		AIL.COM		Website	WWW.REINV24GROUP.COM		
Years In Business	4		Average Tic	ket		Gross Annua	al Sales <u>1,200,00</u>	00.00
Do you currently ha	ave cash a	advance?	No V	Vith who? _			Balance	
Current Credit Card Processor				Average Processing Volume				
Last Month Vol.		#of Ti	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Ti	ckets		4th Month Vol.		#of Tickets	
						_		
Owner #1 Name	LUCIA LEI			Title	PRESIDENT			
Date of Birth	01/25/1978 			SSN	767-18-67	78		
Full Home Address	2261 NE 201 STREET							
Home Phone	(954) 865-8122 Cell P			Email		REINV74@GMAIL.COM 		
Own/Rent	\$ <u>0 Own</u>	ıYe	ars There <u>5</u>	Dr	ivers Lience # <u>L1</u>	112-538-78-525	5-0 State FLO	RIDA
Owner #2 Name				Title				
Date of Birth				SSN				_
Full Home Address								
Home Phone		Cel	l Phone		Email			_
Own/Rent	\$	Ye	ars There	Dr	ivers Lience #		State	
Business Home Bas	ed?	No Locatio	n: Lease/Own	Owned	Lease Term		Monthly Rent	
Landlord / Mortgage	Co.	NONE			 Conta		LDG	
Contact Phone	_		Cell			. Email	MICHEL@LD	GCOMPANY.COM
Bank Name/Branch	BANK OF	F AMERICA	Contact	MICHAEL	MARQUIES	Phone	(305) 354-3505	
Trade Reference#1	LDG		— Contact	MIKE		Phone	(954) 865-8122	
Trade Reference#2			— Contact			Phone		
Trade Reference#3			 Contact			Phone		
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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 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 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	LUCIA LEIBOVICH	Date	09/11/2019
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