

DBA Name	Clean X-press					_Legal Name		Heat	Heated Solutions LLC					
Type of Business	Equipment and chemical Sales					_Tax ID		4618	461886339			I	LLC	
Full Business Addre	ess	30725 U	IS HWY 19	9 N #237	, Palm	n Harbor,	, FL 34	684						
Full Billing Address														
Phone at Location		(877) 8	370-5088				Best P	hone <u>(678</u>	3) 939-1	495	Fax	(877)	871-5270	
Business Email	charlesdavenport@cleanx-press.com					Website		www	www.cleanx-press.com					
Years In Business		3		Averag	e Ticke	et _			Gross	Annual S	ales	1,235,000	0.00	
Do you currently h	advance <sup>2</sup>	ance? Yes With wh			ith who?	Lendir	ng Club			Bala	ance <u>30,00</u>	00		
Current Credit Card Processor Average Processing Volume														
Last Month Vol.			#of Tic	kets			2nd	Month Vol.			#of -	Tickets		
3rd Month Vol.			#of Tic	kets			4th	Month Vol.			#of <sup>-</sup>	Tickets		
Owner #1 Name	Charles [	Davenport				Titl	le	Managing	) Membe					
Date of Birth	0609197	06091971				SSN 555-85-7413			411					
Full Home Address	17717 G	ulf Blvd, U	nit 501, Re	edington S	hores,	FL 33708								
Home Phone	(678) 93	9-1495	Cell I	Phone	(	678) 939-	-1495	Email		charlesd	avenport	@cleanx-pr	ess.com	
Own/Rent	\$ <u>0 Ren</u>	nt	Year	s There	1		Drivers	Lience # D	0151-141	71-209-0	_State	Florid	a	
Owner #2 Name						Titl								
Date of Birth						SSI	N							
Full Home Address	-													
Home Phone				Phone	_			Email —						
Own/Rent	\$ Own		Year	rs There		_	Drivers	Lience # _			_State			
Business Home Bas	sed?	Yes	Locatior –	n: Lease/	Own	Lease	d	Lease Ter	m	onth to	Mont	hly Rent	532.00	
Landlord / Mortgag	e Co.							Conta	act	_				
Contact Phone	_			_	Cell	_				Email	_			
Bank Name/Branch				Conf	tact				P	hone				
Trade Reference#1				Con	tact				P	none				
Trade Reference#2	!			Con	tact				P	none				
Trade Reference#3				– Cont	tact				P	hone _				
I hereby represent that all authorize you to whom thi will provide financial state authorize Money Works D	is applicatio ements, tax irect, Inc. to	n is made o returns, etc receive pe	r your agent c. as you de rtinet inform	ts to invest em necessa nation rega	igate my ary. A ph rding the	y/our finand hotocopy o e commerc	cial resp of this au cial lease	onsibility and on the consibility and on the consistency of the consis	credit wor II be deem reference	thiness, spec led as accep led location fi	cifically pri stable for re rom my lea	ncipal and co elease of cre ssing compar	rporate entities dit information	s, and I. I/We t. I/we

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	Charles Davenport	Date	09/20/2016