

DBA Name		Odyssey				Lega	al Name	Benner China & Glassware of Florida, Inc.				
Type of Business		Corp				Tax	: ID	5920882597			(	Corp
Full Business Addre	SS	5329 Po	wers Aver	nue								
Full Billing Address												
Phone at Location		(904) 7	(904) 733-4620				est Phone		Fax	(904)	733-4622	
Business Email		ashley@	ashley@odysseyfl.com				Website		seyfl.com			
Years In Business		19			Γicket <sub>-</sub>			Gross Annu	al Sales	7,500,000	.00	
Do you currently ha	ave cas	h advance?		Yes	With who?	?			Bala	ance <u>2000</u>	00	
Current Credit Card	ssor					Average	Processing V	olume				
Last Month Vol.			#of Tick	ets		2	2nd Month Vol.	-	#of <sup>-</sup>	Tickets		
3rd Month Vol.			#of Tick	ets			4th Month Vol.		#of -	Tickets		
Owner #1 Name	Scott M	1ills			Ti	tle	President					
Date of Birth	10/26/1	1962			SS	5N	060-56-908	34				
Full Home Address	1803 1	0th Street N										
Home Phone	(904) 7	33-4620	Cell P	hone	(904) 234	1-321	12 Email	smill	ls@odysseyfl.	com		
Own/Rent	\$ <u>0 Re</u>	ent	_ Years	There	19	_Driv	vers Lience #		State			
Owner #2 Name					Ti	tle						
Date of Birth					SS	5N						
Full Home Address												
Home Phone			Cell P	hone			Email					
Own/Rent	\$ Owr	า	_ Years	There -		_Driv	vers Lience #		State			
Business Home Bas	ed?	No	Location	: Lease/Ov	vn <u>Leas</u> e	ed	Lease Tern	n <u>12</u>	Mont	hly Rent	7,300.00	
Landlord / Mortgage Co. <u>J</u> a		Jay Gladdi	ng				Conta	ct				
Contact Phone		(404) 229-	-5042		Cell			_ Ema	ail			
Bank Name/Branch				Contac	it			Phone				
Trade Reference#1				- Contac	 :t			– Phone				
Trade Reference#2				- Contac				– Phone				
Trade Reference#3				- Contac	 :t			– Phone				
I hereby represent that all	the above	information is	true and un	derstand that	making false	state	ments might he cons	idered fraud. By	nroviding the a	hove informa	tion the appli	icant(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	Scott Mills	Date	07/27/2017