

DBA Name		SHARK F	EXPEDITED L	I.C	اد	gal Name		SHARK EXPE	DITED LLC		
Type of Business		Transportation			Tax ID		82 1621286			LLC	
Full Business Addre	cc	11021 be				1X 1D		02 1021200		_	LLC
Full Billing Address	55	11021 00	eckiey pi								
Phone at Location		(503) 31	17-6077		F	Rest Phone	(503)	317-6077	Fax		
			spatch@sharkexp.com			Website		sharkexpedited.com			
Years In Business		2.5		erage Tic	ket	Websit		Gross Annual		0,000.0	0
Do you currently ha	wo cach i		— No		With who?			GIOSS AIIIGGI	Balance		
			INC) V	VILII WIIO! _				_	e	
Current Credit Card	Processo	or	_			_ Av	/erage	Processing Vol	ume _		
Last Month Vol.			#of Tickets			2nd Mont	h Vol.		#of Tick	ets	
3rd Month Vol.			#of Tickets			4th Montl	h Vol.		#of Tick	ets	
Owner #1 Name	Mykhaylo	Zalozh			Title	Ow	ner				
Date of Birth	01-22-19	70			SSN	543	3-67-095	55			
Full Home Address	11021 Be	ckley Pl									
Home Phone	(503) 317	-6077	Cell Phon	e		Em	ıail	dispat	ch@sharkexp.c	om	
Own/Rent	\$ 0 Rent	-	Years The	ere <u>503</u>	33176077 D	rivers Lienc	e# <u>Z</u>	120553700220	State	FL	
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Phon	-		Em					
Own/Rent	\$		Years The	ere	D	rivers Lienc	e#		State		
Business Home Bas	ed?	Yes	Location: Le	ase/Own	Leased	Leas	se Tern	n 0	Monthly	Rent	1,200.00
Landlord / Mortgage	- Co —						Conta				
	_			Call			Conta				
Contact Phone	_			Cell	I			Email			
Bank Name/Branch				Contact				Phone			
Trade Reference#1				Contact		<u> </u>		_ Phone			
Trade Reference#2				Contact				– Phone			
Trade Reference#3				Contact				– Phone			
								_			

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 Translution, 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	Mykhaylo Zalozh	Date	01/16/2020