

DBA Name	J and G	Explosives, LLC	Le	egal Name	J and G Explo	sives, LLC			
Type of Business	Mining		Ta	ax ID	472669910		Corp		
Full Business Addre	ss 413 Idlev	wyld Dr. Ft. Lauderdal	le, FL 33301	i					
Full Billing Address									
Phone at Location	(407) 8	83-0734	E	Best Phone (407) 883-0734	Fax			
Business Email	aimee@	jandgexplosives.com	1	Website					
Years In Business	3	Average Ti	cket		Gross Annual	Sales <u>1,440,950.64</u>			
Do you currently ha	ave cash advance?	No	With who? _			Balance			
Current Credit Card Processor				Average	Processing Volu	ıme			
Last Month Vol.		#of Tickets		2nd Month Vol.		#of Tickets			
3rd Month Vol.		#of Tickets		4th Month Vol.		#of Tickets			
Owner #1 Name	John Angelini		Title	CEO					
Date of Birth	04/29/1953		- SSN	266-17-03	35				
Full Home Address	413 Idlewyld Dr		-						
Home Phone	(954) 275-6125	Cell Phone		Email	aimee@	jandgexplosives.com			
Own/Rent	\$ 0 Own	Years There 10	D	rivers Lience # A	524479531490	State FL			
Owner #2 Name			Title -						
Date of Birth			SSN -						
Full Home Address									
Home Phone		Cell Phone		Email					
Own/Rent	\$	Years There	D	rivers Lience # _		State	_		
Business Home Bas	ed? Yes	Location: Lease/Owr	owned Owned	Lease Terr	m	Monthly Rent	_		
Landlord / Mortgage	e Co			Conta	act				
Contact Phone		Ce	·II		Email				
Bank Name/Branch	Wells Fargo	Contact	Suzi		Phone	(407) 330-7289			
Trade Reference#1	Maxam North Ea	st Contact	John Mo	ran	Phone	(801) 233-6004			
Trade Reference#2	Austin Powder	Contact	Dave Ve	erez	 Phone	(216) 464-2400			
Trade Reference#3	AAMCOR	Contact	Harley E	Bradbary	— Phone	(801) 973-0306			
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)									

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	John Angelini	Date	02/10/2017