

DBA Name		na			Legal	Name	yoyo lip glos	s inc	
Type of Business		cosmetic manufacturing			Tax ID		371573223		Corp
Full Business Address		2438 47th str	eet						
Full Billing Address									
Phone at Location		(718) 357-6304			Best Phone (718)		) 357-6304	Fax	(718) 889-6064
Business Email		angie@yoyo		Website		www.yoyolip	www.yoyolipgloss.com		
Years In Business		9	Average	Ticket			Gross Annual	Sales 3,	400,000.00
Do you currently have cash a		advance?	Yes	With w	ho? mer	chant cap		_ Baland	ce <u>140,000.00</u>
Current Credit Card Processor		or				Average	Processing Vo	lume	
Last Month Vol.			#of Tickets		2nd Month Vol.			#of Tickets	
3rd Month Vol.		#of	Tickets		4tl	n Month Vol.		_ #of Tic	kets
Owner #1 Name	evangelia	a parlionas			Title	ceo			
Date of Birth	0926197				SSN	094-82-67	745		
Full Home Address	157-22 p	owells cove blvc				•			
Home Phone	(718) 35		Cell Phone			Email	angie	@yoyolipgloss.	com
Own/Rent	\$ 0 Owr	n	Years There	1	Drive	 rs Lience #    7	14016955	State	ny
						_			
Owner #2 Name	margarit	a parlionas			Title	cfo			
Date of Birth					SSN	262-67-65	503		
Full Home Address	15722 pc	owells cove blvd							
Home Phone	(917) 226	6-7755 (	Cell Phone	(917)	226-7755	Email	marga	ritap@yoyolip	gloss.com
Own/Rent	\$ Own		Years There	20	Drive	rs Lience # <u>8</u>	19883807	State	ny
Business Home Bas	sed?	No Loca	ntion: Lease/C	)wn <u>Le</u>	eased	Lease Ter	m	Monthly	y Rent
Landlord / Mortgage Co. andreone in		indreone inc				Conta	act	chris andre	one
Contact Phone	<u>(</u>	718) 640-4050	)	Cell			Emai	I <u>andr</u>	reoneinc@gmail.com
Bank Name/Branch		Cont	act			Phone			
Trade Reference#1			Cont	act			Phone		
Trade Reference#2			Cont	act			— Phone	_	
Trade Reference#3			Cont	act			 Phone		
I hereby represent that all	the above ir	nformation is true a	nd understand th	at making fa	alse stateme	ents might be cor	sidered fraud. By p	roviding the abov	ve 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 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	evangelia parlionas	Date	03/08/2017