

DBA Name		The Exc	hange		[	egal Nam	e	DesertExchan	ge LLC		
Type of Business		Retail				Tax ID		27-0739791			LLC
Full Business Addre	SS	72840 H	wy 111 U-	409 Palm D	esert CA 9	2260					
Full Billing Address											
Phone at Location		(760) 779-8778				Best Phone (760)		296-7400	Fax	(760) 779-87	78
Business Email		desertexchange@aol.com				Website		exchangepd.com			
Years In Business		9		Average Ticket _				Gross Annual S	Sales 48	35,000.00	
Do you currently ha	ave cash	advance?		Yes	With who?	New Logic	and Ta	rget Financial	Balan	ce <u>35,000 +</u>	
Current Credit Card Processor						_ ,	Average	Processing Volu	me		
Last Month Vol.			#of Tick	ets		2nd Mor	nth Vol.		#of Tio	kets	
3rd Month Vol.			#of Tick	ets		4th Mor	th Vol.		#of Tic	ckets	
Owner #1 Name	Michael Ja	acobs			Titl	e C	FO				
Date of Birth	desertexchange@aol.com			SSI		·		17			
Full Home Address	7 Kavenish Rancho Mirage CA 92270			92270	_	_					
Home Phone	(760) 296	5-7400	Cell Pl	none	(760) 296-	7400 E	mail	deserte	xchange@ac	ol.com	
Own/Rent			 Years	There 3		Drivers Lience # 160		502137706 State		NV	
Owner #2 Name					Titl –	e _					
Date of Birth					SSI	N _					
Full Home Address											
Home Phone			Cell Pl	none		E	mail				
Own/Rent	\$		_ Years	There _		Drivers Lier	ce # _		State	<del></del>	
Business Home Bas	ed?	No	Location:	Lease/Owr	Lease	d Le	ase Terr	m	Monthl	y Rent	
Landlord / Mortgage	e Co. <u>W</u>	/estfield					Conta	ict .			
Contact Phone	_			_ Ce	ell _			Email			
Bank Name/Branch US Bank Conta			Contact	Bryan			Phone				
Trade Reference#1				Contact				Phone			
Trade Reference#2				Contact				 Phone			
Trade Reference#3				Contact				Phone			
I hereby represent that all	the above in	formation is	true and un	derstand that n	naking false st	atements mi	aht be cons	sidered fraud. By pro	viding the abo	ve information, the a	pplicant(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 authorized 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	Michael Jacobs	Date	04/28/2017