

DBA Name		Dynamic Consulti	ng II C	Legal	Name	Dynamic Co	nsulting LLC		
Type of Business		Real Estate		Tax ID		46-4167793		LLC	
Full Business Address		2041 Albany Drive SW				10 1107733		-	
Full Billing Address	33	2011 / libarry Brive	. 511						
		(404) 758-0848		Rest	Phone (404) 2	229-6888	Fax	(770) 702-0646	
Business Email		darren@dynamicconsuloting101.c				dynamicconsulting101.com			
Years In Business			Average Ticket			Gross Annual Sales 90,000.00			
Do you currently ha	avo cach	advanco?	_					2	
			INO VVILII					·	
Current Credit Card	or			Average P	rocessing Vo	lume _			
Last Month Vol. #of Ticke			ets	2nd	Month Vol.	#of Tickets			
3rd Month Vol.		#of Tick	ets	4th	Month Vol.		_ #of Tick	ets	
Owner #1 Name	DARREN	MARTIN		Title	Owner				
Date of Birth	05/27/19	967		SSN 256-39-50		4			
Full Home Address	dress 2041 ALBANY DR SW								
Home Phone	(404) 229	9-6888 Cell P	hone (40	(404) 229-6888 Email			58dmartin@gmail.com		
Own/Rent	\$ <u>0 Own</u> Years		There 46	Drivers Lience # 02		5695004	State	GA	
Owner #2 Name				Title					
Date of Birth				SSN					
Full Home Address									
Home Phone		Cell P	hone		Email				
Own/Rent	\$	Years	There	Driver	s Lience #		State		
Business Home Bas	.ed?	Yes Location:	Lease/Own	Owned	Lease Term		Monthly	Rent	
Landlord / Mortgage		Chase Bank			Contac	-	1800848913		
	e Co. <u>C</u>	Lilase balik			Contac		-	0	
Contact Phone	_		_ Cell			_ Emai			
Bank Name/Branch	Wells F	argo Cascade	Contact			Phone	(404) 752-9	614	
Trade Reference#1			- Contact			Phone			
Trade Reference#2			Contact			- Phone		_	
Trade Reference#3			Contact			- Phone			
				61 11		- 16 18			

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	DARREN MARTIN	Date	11/18/2016
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