

DBA Name		aot tel	ecom		Legal N	lame	alpha omega	telecom,	inc.		
Type of Business		telecommunications broker			Tax ID		412212809			Corp	
Full Business Addre	ess	3802 eh	802 ehrlich rd. ste. 210d tampa, fl			fl 33624					
Full Billing Address											
Phone at Location (813) 345-4624			Best Phone (813)			345-4624	Fax	(866) 250	-2729		
Business Email	jay@sipforcallcent			ters.com	W	ebsite	www.sipforcallcenters.com				
Years In Business		9		Average Tick	et		Gross Annual Sales 131,000.00				
Do you currently h	ave ca	sh advance	?		With w	ho?			Balance		
Current Credit Card	d Proce	ssor				Average I	Processing Vol	ıme			
Last Month Vol.			#of Ticke	ets	2nd	Month Vol.		#of	Tickets		
3rd Month Vol.			#of Ticke	ets	4th	Month Vol.		#of	Tickets		
Owner #1 Name	jay ad	ams			Title	president					
Date of Birth					SSN	266-73-173	38				
Full Home Address	14921	lejuene lane	e tampa, fl 33	3613							
Home Phone	(813)	(813) 453-1829 Cell Phone (813) 453-1829 Email jay@aottelecom.com									
Own/Rent	\$ <u>0 C</u>)wn	Years	There 12	Drivers	Lience # a3	352421604700 State florida				
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Ph	one _		Email —					
Own/Rent	\$		Years	There	Drivers	Lience #		State		_	
Business Home Bas	ed? _	No	_Location:	Lease/Own	Leased	_Lease Tern	n	Mon	thly Rent		
Landlord / Mortgage	e Co.	a&t mana	igers			Conta	ct	tara bikk	kasani		
Contact Phone		(352) 697	<u>'-0452</u>	Cell	(352) 6	97-0452	_ Email	<u>a</u>	_t_managers@y	/ahoo.com	
Bank Name/Branch	chase	e		Contact	customer ser	vice	Phone	(813) 42	26-1178		
Trade Reference#1	Trade Reference#1 tmobile			Contact	customer service		– Phone	(800) 93	937-8997		
Trade Reference#2	e Reference#2 staples			Contact	customer service		– Phone	(800) 76	767-1291		
Trade Reference#3	front	ier commu	nications	Contact	customer ser	vice	Phone	(800) 92	21-8102		
I haraby raprocent that all	the abov	o information i	s true and and	orstand that mal	ring falso statement	to might he can	idorod fraud. By an	oviding the	above information t	ho 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	jay adams	Date	07/19/2016