

DBA Name	FST		Legal Name	Florida Shuttle Transportation LLC
Type of Business	Type of Business Travel/Tours		Tax ID	273285939 LLC
Full Business Address 1950 Willow Wood dr Kissimmee fl,			,34746	
Full Billing Address				
Phone at Location	(407) 738-77	27	Best Phone	Fax
Business Email	reservations@fl	oridashuttletransport	ation.com Website	Floridashuttletransportation.com
Years In Business	8	Average Ticket		Gross Annual Sales 600,000.00
Do you currently have cash advance? Yes With who? Yellowstone, Everest FundingPetrus Balance 21,000				
Current Credit Card Processor Average Processing Volume				ge Processing Volume
Last Month Vol.	#of	Tickets	2nd Month Vol	#of Tickets
3rd Month Vol.	#of	Tickets	4th Month Vol.	#of Tickets
Owner #1 Name	Petrus Van Koningsbrugge	en	Title owner	
Date of Birth	12-2-1951		SSN 591-95-0	0684
Full Home Address	1950 Willow Wood dr Kissimmee Fl, 34746			
Home Phone	(407) 738-7727 C	ell Phone	Email	Petrusvank@hotmail.com
Own/Rent	\$ <u>0 Own</u>	'ears There 8	Drivers Lience #	v525-660-51-442-0 State Florida
Owner #2 Name			Title	
Date of Birth			SSN	
Full Home Address				
Home Phone	C	ell Phone	Email	
Own/Rent	\$\\ 	ears There	Drivers Lience #	State
Business Home Bas	ed? Yes Loca	tion: Lease/Own	Owned Lease Te	rmMonthly Rent
Landlord / Mortgage Co. SPS Contact				
Contact Phone		Cell	-	Email
Bank Name/Branch	Fairwinds	Contact		Phone
Trade Reference#1		 Contact		Phone
Trade Reference#2		Contact		Phone
Trade Reference#3		Contact		Phone
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 above 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.				

Printed Name

Petrus Van Koningsbruggen

Date

06/13/2017

Signature#1